Address

DELIVERED AT THE OPENING OF THE

MEDICAL DEPARTMENT IN KING'S COLLEGE, LONDON,

On the 1st of October, 1866.

BY SIR WILLIAM FERGUSSON, BART., F.R.S.,
PROFESSOR OF SURGERY IN KING'S COLLEGE, AND SURGEON TO KING'S COLLEGE HOSPITAL.

MR. PRINCIPAL AND GENTLEMEN,—Another sessional year dawns upon the Medical Schools of London, and we in this College hail its advent with our customary congratulations. We are delighted to see familiar faces and friends; we welcome those who appear among us for the first time; and we rejoice that we have been spared once again to begin that work of love and labour in which most of us have spent so many years of our lives. On the part of our much-loved Principal, and for my colleagues, I bid you all a hearty welcome. It has been my duty on more occasions than one to hail your predecessors on similar auspicious days, and I never did so more sincerely than I now address you.

In early days, when thus engaged, whilst zealously advocating, to the best of my ability, the claims of Medicine as a profession, I felt that I was but a struggler in the great ocean on which I had embarked only a few years before those who were listening; yet, now that my battle in the fitful heaving struggle is drawing to an end, I can say, with all my heart and soul, that, with my experience of life and my profession, had I to begin the world again I should a second time select Medicine, and buckle to my task as cheerily as I did when a lad of eighteen, without special prospects, and without a hope but that engendered by a firm determination to do my duty, and a belief that straightforward industry would meet a fair reward. Now, after years of labour, with almost every ambitious hope of life fulfilled—and among these hopes I may mention one not the least, that of being a Professor in King's College, London,—I am here, with an experience which time and occasion can alone bring in some degree to maturity, to offer you such an address as may seem most appropriate when men meet to begin a new year of labour and study. To those who, like myself, have spent a lifetime in such matters, addresses of this sort must be monotonous; but it should be kept in mind that they are not intended for reverend seniors. They are for those to whom the profession is new, or all but new; they are intended for the beginning of a generation; and as each year has its own fledging, the oft-told theme has a novelty to the beginner which it lacks with those who have already been years at our work.

Gentlemen, it is hardly possible for the young mind to estimate or realise the magnitude or interest of the profession of Medicine. Its influence extends over the whole human race—over every animal subservient to man's use and pleasure; and from the lowest grade of man in savage life to the sovereign ruler over millions in the highest state of civilization, it is held in the greatest respect. There is, perhaps, no single occupation or profession amongst our social arrangements which has such influence on individual man; and whilst it in some degree sways the daily action of every one, it is equally felt by the masses. It influences alike the inmates of a cottage and those of a palace. Although pre-eminently of a peaceful character, even the sinews of war may be paralysed without its healthful assistance.

To what, it may be asked, is all this to be attributed? The answer is simple. Medicine has charge of the health of the living frame. There is no gift which the Almighty has bestowed on man equal to that of health. Without it the greatest intellects must be enfeebled, and it is in the mortal nature of man, even with his superior mental endowments over other animals, to place health as the foremost blessing of life. When we reflect upon the meaning of health, we are more fully impressed with the magnitude and grandeur of the objects and aims of Medicine.

We often admire, and not without good reason, the composition, the mechanism of a door-lock, of a Babbage's calculator, of a watch, of a sewing machine, of a steam-engine, of the numberless contrivances of man's ingenuity; yet how these fall short of the mechanism of man's body itself! A beautiful treatise on the human hand was written by one of England's greatest physiologists, Sir Charles Bell. Very recently a course of six lectures was delivered at the College of Surgeons by one of our most distinguished anatomists and surgeons, Mr. Hancock, on the human foot, in which he says: "In the whole range of mechanics, architecture, or engineering, where can we meet with such a structure as this?"* Volumes have been written on the mechanism of the heart, of the eye, of the ear, of bones, muscles, and tendons; and when we think that all these surpassing perfections are united in one frame, our admiration is blended with awe that such things can be and actually are. In the watch and the steam-engine we can appreciate the design and mechanism developed by the head and hands of man; we can recognise and appreciate the physical power of a beam, of a lever, of a spring, of water, of steam; even the mysterious electric current can be controlled, guided, and brought to marvellous use; we know the agencies that can originate and cause this current to encircle the globe; we know that all these wondrous developments of man's ingenuity are the gift of the Divine Creator, and that of all His creatures man alone has been endowed with intellect sufficient to develop and appreciate such marvels; and when we consider that these marvels come from the intelligence of man; that that intelligence is associated with life, and particularly with the vigour of life; that "vigour of life," intellectual and physical, means health, we may well be awe-stricken at the marvellous mechanism of the human frame, and more particularly at the motor element which inhabits it—which prompts and sways its diversified movements, aye, even sways thought itself; and in our awe we may feel gratified that the profession of Medicine has chiefly to deal with the health of this marvel of God's creation!

The precious things in this world are usually guarded most carefully by the highest intelligence. The soul of man we deem imperishable, and most precious. Such a thought is the highest mark of civilization; it is the grand distinction betwixt heathen and Christian, and we delight to cultivate that intelligence which, by fostering health, guards our soul and tells us how we can best during life provide for this immortal part of man.

Success in Medicine implies efficiency; efficiency is, perhaps, the surest guarantee of success. Let me explain what I mean by these terms. We delight to pay homage to men in our profession who distinguish themselves in special departments: the great chemist, the great anatomist, the great pathologist, the great histologist. But it is not specially needful that any professional man must be pre-eminently accomplished in one or all of these departments of science; and, to say the truth, there is no demand either among ourselves or on the part of the public for great numbers of such men. A reasonable and comparatively moderate amount of such knowledge is all that may be required for both efficiency and success. As a round yet rough statement, it may be said that there are 20,000 professional men in England to 20,000,000 of population. The people do not expect these 20,000 men to be high-class philosophers; but they expect them to be well-educated gentlemen, and that that education should be such as best suits them to their calling. If it is too refined the mind may be incapacitated for commonplace work; if it be not up to a certain standard, it will be unfit even for such work. This term "commonplace" may possibly surprise some of my younger listeners; but it is purposely selected. There is a vast amount of what I call by this name required in our profession and occupation, just as there is in all the occupations of life; and it is in the

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due fulfilment of that commonplace work that the daily wheel of business is conducted.

Now it is for the purpose of learning how to enact daily business that most, perhaps all, of you have been sent here; and assuredly it is much more the purpose of medical schools to educate to this work than to bring men out as philosophers. There is nothing in such education to prevent a man aspiring to the heights or depths of philosophy; but depend upon it that accomplishment in the ordinary business of life is the true philosophy for the masses, both as regards the masses in our profession and the masses in the public.

The conduct of the youth foreshadows that of the man, and it usually happens that teachers can fortell the probable course and success in life which shall befall most of their pupils. In a well-conducted school, there is always such notice taken of each pupil that all become more or less marked men; and if the indications be good, a youth can carry with him from the school in which he has been educated such marks of approbation and esteem as shall give him an onward impulse in his start in life, and act as a *vis a tergo* to the end of his career.

But, gentlemen, besides the incitement to duty and the prospect of worldly success, there are in the study of medicine attractions which are scarcely excelled, if at all equalled, in the study of any other profession. The subjects embraced in such a course of study are certainly more extensive than in any other profession or occupation whatever. Besides a preliminary education equivalent to that of other gentlemen, the student in medicine must be proficient in Human Anatomy, in Physiology, in Chemistry, in Materia Medica, in Botany; he must possess a good knowledge of Natural Philosophy, Natural History, and of Comparative Anatomy; and, without referring to certain subdivisions of these departments in which proficiency will also be expected, he has, over and above, to acquire a knowledge of Medicine and of Surgery, properly so called, as, also, of Midwifery and of various other specialties. Here is a volume on Human Anatomy, one on Physiology, one on Chemistry, one on Materia Medica, and one on Botany; every page of each the pupil is expected to have well-nigh by heart. Here are two modern and much esteemed volumes on the Practice of Physic, here is one on Surgery, and here one on Midwifery. I might show others on the Brain, the Eye, the Ear, the Throat, the Lungs, the Heart, the Stomach, the Liver, the Kidneys, the Bladder, the Prostate, the Rectum, the Bones, the Joints,—even more; and with these also the acquaintance must be, if not so precise, at least well-nigh as familiar. All such knowledge must be acquired before a youth can present himself for examination for a diploma; and, without professing to be familiar with the special requirements from candidates for the Church or for the Bar, I think I may safely affirm that no such tax is put upon the aspirants to these professions, particularly in the short space of between three and five years, when the pupil is at his studies.

Even these form but a portion of the field of study, for the student is expected to spend a large portion of time in the museum of materia medica, in the dissecting-room, in the post-mortem theatre in the hospital, in the museum of natural history, and in that of pathology; and, moreover, is presumed to be in daily attendance on the hospital from first to last, besides the various courses of lectures demanded by the licensing boards, for all of which certificates are positively required!

Here is enough, gentlemen, to exercise the mental powers of the cleverest men, and truly the task is great indeed. Well might a youth pause on beginning such an eventful way of life—a way to which the barriers appear so formidable that they might be held as altogether insurmountable. Yet do not fear! All, and more than all, that I have referred to has been accomplished by your predecessors in recent years, and the word "impossible" must have no place in your aspirations. You must hold yourselves as good as those who have gone before you. Men often refer to "the good old times," as if the world were in decadence. The old song has it that "we shall never see the like again;" but my impression is that even better times than ever are in store for the future. At least such I think to be the case in the medical profession; for, as with certain other departments, Mr. Grove's theory of "continuation" applies in a remarkable manner to our profession. It may be doubted if single heads or intellects will ever arise which shall surpass those of bygone times. Another Harvey, Jenner, or John Hunter may perhaps never be seen; but the accumulation of knowledge, always sure to be well tended whilst civilization lasts, will give in after-times a power and force of character to our profession which will admirably illustrate the cumulative influence of "continuation." You, gentlemen, will have your education under such gradually increasing advantages. You will have greater opportunities than ever your immediate predecessors enjoyed, and in reality you ought to excel in knowledge all who have gone before you.

I have alluded to the grandeur and dignity of our profession; but it is perhaps better in accordance with my present duties that I should draw attention to its commonplace, every-day aspect, and to your commonplace, every-day objects.

In civilized life—and the higher the civilization so much the more conspicuous does it become—men suit themselves to each other's wants and to the wants of the community at large. Our professions, our trades, our occupations of all sorts, from the tiller of the soil to the cunning-handed mechanician, from the grammarian to the rhetorician, from the clerk to the statesman ruling the destinies of millions, are all the products of civilization. As we trace the social history of man from his savage condition upwards, variety of occupation seems a remarkable feature. From the simple trapper of fish and animals for the sake of food, from the savage warrior who may kill his opponent for the sake of his scalp, we can trace the gradual development of separate occupation and labour, that each may serve another—a reciprocity of work whereby each can best enact that for which his mind and frame seem to have been designed; whilst all are bound together by one great tie, each assisting in the way he best can—aiding in that great social compact to which men, the most intellectually endowed of God's creatures, give the name of civilization.

It is needless here to attempt to trace the rise and progressive development of occupations and professions—of "arts and sciences;" it is sufficient to point out that you are about to take your parts in the great whole of which it is our privilege to be individual members, in this the much-favoured nineteenth century—favoured by God and man, by the development and diffusion of marvels of knowledge and power such as the mightiest intellects in former years neither anticipated nor dreamt of.

Of the usually recognised professions in this country, those of the divine, the lawyer, the soldier or sailor, the engineer or the medical man, you have chosen the latter; and now you must so do your work as best to reciprocate those good offices which others do to you.

It is usual on these occasions to refer specially to the scientific character of your chosen occupation, and right, too, that such should be; but I must remind you that unless or until science be rendered in some way subservient to the use of man, it may be likened to a sort of plaything of little value to anyone. Some say that even here it is probably our ignorance which prevents us applying the so-called science to man's use. But not to detain you with such abstract views, let me state plainly that your friends have sent you here, not so much to make men of science of you, as that you shall acquire that kind of knowledge which is to enable you to take a useful place in our social system; to use still plainer terms, to enable you to earn your daily bread. This may seem a humble, even sordid, view to take of your ensuing occupation. Assuredly, I say, acquire all the science that you can grasp at; and, happily, you cannot learn our profession without intuitively, as it were, imbibing science, although nine-tenths of you or more, to be of material service to yourselves or others, must become hard-working citizens, dealing out your professional stores as if science had no place in your thoughts. But I repeat that happily you cannot learn or exercise your profession without science, for its grandest features are in reality associated with science in some of the most pleasing and palpable aspects. My main object in thus alluding to the science of our profession is to say that the art of Medicine requires your attention fully as much as the science; for without the art the science would be well-nigh useless. I am aware that I am now touching delicate ground; for, if I mistake not, few men have the courage thus, as it were, to hold the scales equally balanced between the science and art of Medicine. The fear that he may be held a commonplace fellow, with neither knowledge nor love of science, that he takes "a low view" of his profession—of his occupation, and the gibe of being a mere art man, may induce him to say nothing of art, and to refer to Medicine as if wholly made up of science. But, at the risk of incurring such suspicions or accusations, I venture to say that the art of Medicine is less cultivated than it ought to be. I will now go further, and say that, in my opinion, even our great licensing bodies have to all appearance put more stress upon the one than on the other. They demand from the schools, if not too much of science, certainly more of it than of art. But a change is appearing in this respect; for, without abating the requisite amount of science, there is a call among many

of the examining boards for a display of art which necessitates a much more practical kind of education than has previously been insisted on. I will yield to no man in zeal to uphold the scientific aspect of Medicine; I believe in it most firmly, although many shortcomings must be admitted. Yet, however difficult its acquirement may be, I am inclined to think that it is equally difficult to become familiar with the art. It is curious to observe how men's minds differ in regard to these two aspects of our profession. Some seem to appreciate science only; others art only. It is, perhaps, by the due combination, holding, and application of both to the every-day purposes of our profession that we owe the most perfect of our ordinary practitioners. I must for the present keep our philosophers out of view. We may be proud of them when they appear among us; but I must speak of the body—the masses—of our profession who are to do the daily, I may say the routine, work required by the public at large. It is to such men and to the public that the art of Medicine is so peculiarly valuable.

And what, it may be asked, is this art? The question is difficult to answer. It may be defined as the most perfect application of knowledge to useful purposes. Many men with excellent knowledge of science or art are yet unsuccessful in its application; their course of life is consequently not so fortunate as that of others, who are even less accomplished, and it often puzzles those of experience of the world to give reasons why certain men are less or more successful than their contemporaries. Perhaps the word "tact," which is in such frequent use in modern times, gives the best explanation, as it is well known that most of the successful combinations and issues in our social arrangements are brought about by this quality. The tactics of the warrior, when judicious, have been long recognised as of the utmost value; but, curiously, little comparatively has been said of those of the civilian. Yet successful arrangements in civil life are as essential to our common welfare as those for the conduct of war. Possibly to the mind of some people tact is allied with the mean quality, cunning; but the difference in my estimation is just as great as between fair weather and foul. A man of tact may be as open as the light of day, a cunning one is essentially a sneak and a deceiver.

But let us look more carefully, or in another way, at what best exemplifies this art. What may be called the practice of physic forms but a portion, many would say a small portion, of the healing art. The temperament of a patient, his age, his circumstances, his surroundings, all require special consideration, otherwise neither skill, art, nor tact can be said to have been displayed; and it often happens that as much judgment is required to decide when physic should not be given as when it should. Possibly such judgment may be decided on scientific data, but it involves the art of applying science effectively.

It appears to me strange that I should stand here to defend the art of Medicine! These words seem as old as Medicine itself. I feel, however, as it were impelled to do so from a conviction that there is an affectation in many quarters to decry art, and make it appear that science is all in all in Medicine. I remember well when during the Crimean war there was an urgent demand for medical men to alleviate the sufferings of our wounded and half-starved soldiers, and those highly educated were naturally most in requisition. But art was absolutely needed; and of a considerable number of candidates, some of whom had unusually high characters, many were rejected because they were defective, ignorant, or incapable of applying some of the simplest art. Art and mechanical work are frequently confounded; they are often inseparably associated, yet there is a wonderful distinction between the two. Who would for an instant apply the term mechanic to the painter or sculptor?—men who deal with art so artfully that we at once apply to their occupation the terms "fine art," "high art." I am not aware that the great masters of the brush and chisel pride themselves specially on science in their occupation; but all of us agree that behind the hand that wields the one or other there is a mind, a soul, to arrange, to dictate, and to develop those effects which fascinate and fill us with admiration, which raise those who bring them out among the foremost ranks of men, and command for them immortal fame. The good and great deeds of these masters in art remain as pleasing indications and proofs of the high qualities of the artist. With us unfortunately there is no such advantage. Although we seem to be, under Providence, the visible means of raising to health and strength from the bed of sickness and pain—although we deal essentially with health and life, however happy the application of science and art may be, our proofs of triumph are but rarely appreciated by more than a few relatives and friends, and at best survive only through the remaining brief period of man's existence. But the art of Medicine, dealing as it does with life—that which most men hold so dear,—is, in my estimation, as worthy of admiration as any in which mortals deal. For the physician I believe it to be of the utmost importance for the due and proper application of his professional knowledge; and for the surgeon who wishes to excel, I believe it to be as essential as that quality which constitutes the difference between a Titian and a common house-painter.

In modern times our profession is proud of the conjunction of science with art. As knowledge in anatomy, physiology, animal mechanics, chemistry, and other collateral subjects has increased, so, with that increase, the scientific aspect of Medicine has become developed. I fear, however, that we must even yet be sparing in our assumption of scientific accuracy in our work; and it seems to me a good indication of sound sense when there is but moderate affectation in this respect. It often appears as if, when men get older in our profession, they have less reliance on what may be called its scientific aspect.

As years roll on you will think more on these matters, when you have data of your own acquiring to judge by; meanwhile it is part of my duty on this occasion to enforce upon you the propriety of making the most of your opportunities of acquiring as much scientific and practical knowledge of the profession as time and opportunity permit. You cannot make a selection of one over the other; both must in a manner be studied simultaneously; for it appears difficult to state which is of the greatest importance. It is a remarkable fact that the wisest in our profession are at variance in opinion on this subject. For example, it is understood that the Medical Council—the parliament of our profession—is about equally divided on the question whether a youth should begin his medical studies at the schools or in a general practitioner's surgery; that is, as I take it, whether he should begin in science or in art first. At present, if I am not mistaken, art is placed foremost. One year may be spent at first in a workhouse or infirmary, in dealing with the art of Medicine, and then the science of the schools is to be acquired. This view is, however, maintained by only a bare majority; and many of our highest authorities maintain that the proper study of Medicine should begin at the schools. My own impression is strongly to that effect; and I feel tempted to say to those who sit on these benches for the first time, who may already have been dealing darkly with the profession, that it would be well to consider that they are now beginning their enlightened studies. I say this with every respect for the position and opportunities they may have already enjoyed; but it must be kept in mind that the required education from all our licensing bodies without exception, saving this partial permission, must positively be acquired at schools, and schools too of a well recognised stamp and character. During the period allotted to your studies you have to acquire as much knowledge of both as circumstances will permit; and, with all I have stated regarding art, I am thoroughly convinced that the best training for perfection in that department is a foundation in science. Happily, the science of our profession, in its most useful and common-sense aspect, may be fairly acquired within the time allotted for your studies. There is a fair portion, too, for acquiring a knowledge of art and practice, although in these a life-long study can hardly give perfection.

Let me remind you again, gentlemen, that you are here to acquire the knowledge which is to fit you to earn your daily bread; to enable you to take your position gracefully and usefully amongst your fellow-men. In my opinion you will best fulfil your duties by faithfully submitting to those regulations and observances which have been proved by experience best fitted for your guidance. Men, in youth, often fancy they know better than their seniors; but age generally gives experience, and you can scarcely imagine how much time, attention, ability, and knowledge of the world are given by corporate bodies for the guidance of those who aspire to enter the profession of Medicine. There is a general resemblance of rules and requirements in most of our public bodies, some affecting a kind of superiority over others; but whatever these may be, it is your duty to accord with them, and generally it may be said that those who do so get on the best in life. They pass the requisite examinations more readily, and afterwards they usually get more rapidly into successful practice. They thus best fulfil the obligations they owe to those who have incurred expense and anxiety about their education, and they thus render their initiatory steps into life most likely to secure that success to which men naturally aspire. The duties to which I

now refer extend over a period of from three to five years; and it is fortunate that the time is thus long, for what man, let his intellectual capacity be ever so great, could expect to master in less time the subjects of study to which I have referred? Happily this extended period enables you to engage each separately, so that knowledge is gradually accumulated, and stored in such a way that it can be assorted and used to the best advantage afterwards. Were it not for this arrangement he would be a bold man who would encounter such an array as these books and other things mentioned. The student's path is not only made comparatively easy by this extension of time, but it is further facilitated by the recent custom with some of the examining boards of periodical examinations instead of one, whereby material relief may be given to the mind when the anxieties and uncertainties on several topics are got over, and thus, too, is the path of study made more easy. Yet truly, gentlemen, it must be admitted that your selected way of life is one of great difficulty, and it is my duty to urge you to diligence. Not only have you to think of the value of your work as regards your future prospects, and those examinations which by law you are obliged to undergo, but you have characters to win in this establishment as well. Here you will be constantly under the scrutiny of the authorities of the College, as also of your professional teachers, and much of your after-success will depend upon the character you earn at our College and hospital. "Alma mater" is one of the fondest expressions we in this country can use, and it is applied even more frequently to the institution where education has been chiefly gained than to her to whom, or to whose memory, most men look with the tender associations of the domestic circle.

And now, gentlemen, let us see for what further end all this work is intended. Your livelihood, the character of your profession, the promotion of knowledge and science, are such objects as to rouse the energies and incite the ambition of every well-regulated mind; but, in addition, your special mission is to soothe the bed of sickness, to mitigate the anguish resulting from accident or disease, to relieve the aching brow, to calm the throbbing pulse; and in accomplishing all this you are dealing with a machine which, though of earthly mould, is of divine creation—a form not made of man's hands, and which is moreover endowed with that mysterious agency with which we are so familiar, and yet so ignorant, known to us as life. Whatever the comforts of religion as to our hereafter, few men willingly part with life and soul. Yet without health life is little else than a burden. On great emergencies, moral, social, and political, life is freely risked and given; and it is often our lot to be, as it were, under Providence, the arbiters of life and death. When health is affected, when some fatal malady has set upon the mortal frame, or when some severe injury has been sustained, and when the tide of life is fast ebbing, then comes the eager call upon our skill. It is not permitted to man to have sway on all occasions; yet when his powers are of avail, they often seem to be well-nigh miraculous. It frequently happens in practice that one man sees his way to a beneficial result when others cannot. This is, in reality, the development of higher skill. Gloomy anticipations can be suddenly changed into pleasing realities, and then the value of our services may be appreciated; then it may be understood how in heathen times our profession was held as god-like, and how statues were erected in honour of its most distinguished members.

Gentlemen, in our social arrangements certain men devote themselves to the service of God. The devout student of theology is justly esteemed by us all. His communings with the Almighty we naturally consider the closest that are permitted to man. He intercedes, as it were, between the Divine Being and the immortal soul; he looks from present time to the future; he takes charge of our ethereal being: and in all such aspects we gladly give him that social standing which his profession deserves. Your occupation, gentlemen, is only second to his, and in dealing with God's works you come more closely in contact with evidence of His wondrous power. Our idea of the soul rests upon the imagination. The substance of the frame, your special elementary study, lies palpably before you, and it may be a question whether the divine or the physician comes nearest in proximity to the Maker of all.

Is such study as yours, then, not worthy of the highest appreciation? Have you not cause of congratulation that you are now entering on a field of inquiry which prepares you for a life of usefulness; which leads to so close an acquaintance with the master-works of God; which leads your thoughts instinctively from time to eternity?

Let us start then, gentlemen, on our great and good mission, and let us pray that God's blessing may rest upon our labours.

Abstracts
OF THE
INTRODUCTORY LECTURES
DELIVERED AT THE
VARIOUS MEDICAL SCHOOLS OF LONDON
AT THE
Opening of the Session 1866-67.

CHARING-CROSS HOSPITAL.
MR. BARWELL'S INTRODUCTORY ADDRESS.

GENTLEMEN,—We, your teachers, come together each year in these first few days of October to meet old and new faces of our pupils—to see many for the first time on whom we are to impress the best results of our experience, to influence for their good, and to lay in them the foundation, we will hope, of a happy and prosperous career. This, the inner meaning of such meetings, is not new to you; but interest should not attach merely to what is new. The preacher who said, "All is vanity; there is no new thing under the sun," appears to me to have been speaking less as the wise king than as the worn-out old debauchee, whose many wives and concubines had been rather too much for him. The life of man, honestly regarded, cannot be considered as mere vanity, partly because in this present he has his sole grasp of eternity, partly because—and on this I would chiefly dwell—each man's life and labour is not solely his own property, but a portion of the great commonwealth. He has inherited the result of other men's labour; let others inherit something worthy from him. This idea may be further developed. Whether or no man is originally descended from *several* monkeys, as Dr. Hunt recently asserted at Nottingham, he was doubtless a very different creature to what he is now: probably a skulking, thin-shanked, dusky being, living in woods with cave-bears and hyænas, whom he sometimes ate, and who sometimes ate him. This latter event occurred so inconveniently often, that he found it necessary to fashion sticks and stones into more handy weapons of offence and defence. From this little germ springs all our mighty civilization. Everything, from the wheelbarrow to the railway—from the boy's popgun to the breech-loader, originates in the first rude efforts at convenient weapons. The step from one to the other was not rapid. Ages have gone, and myriads of lives have passed away in aiding such progress. All the oceans of the earth contain not so many drops of water as lives have passed in preparing our present high state of civilization. Of all the earlier history of mankind we have no records, and can only form conjectures about it from the few bits of fashioned flint we find in old caves and river-beds, or from the remains of diminutive peoples who built their strange dwellings on the shallow ooze of lakes and rivers. Even the inner condition of mankind in the earlier historic periods is barely known, but we see that it must have been very rude. I do not pretend to give a history of mankind, but would call your attention to certain singular facts. Nearly four thousand years ago there were gathered round the eastern part of the Mediterranean sea several nations remarkable for the high perfection to which they, in the lapse of time, brought sundry arts, as logic, poetry, lawgiving, sculpture, architecture, &c. One only amongst these, the least gifted in arts, the least civilized otherwise, was not idolatrous. In that nation arose the Man and the event which has since ruled a vaster part of the globe than was then known. Soon after that great event all those learned and artistic races had, as nations, passed away. The places remained, but they knew their peoples and their arts no more; thoroughly corrupt, they were overwhelmed in a deluge, not of water, but of men. Then fell on Europe a long darkness, which lasted till the study of the old writings of Greece and Rome brought forth the period of Renaissance, when art and literature once more revived.

So far, then, we have found that civilization depends on and is measured by the state of the arts. Science—that is, a knowledge of nature and its working—did not exist even in a rudimentary form; its place was supplied by wild guesswork, astrology, demonology, &c. We claim for England—aye, for this very town of London—the birth of Verulam, who only three hundred years ago laid the groundwork and founda-

tion of science: three hundred years—so small a portion of the world's long life. And now the age in which we live is pre-eminently scientific. The general tone of thought is tinged with the Baconian method. The mechanical arts are marked with the same impress, so that their work does not comprise mere accidental hits of discovery, but long chains of solved problems ending in valuable results. There has been since the beginning of the world no age so genial to scientific inquiry as the present; and this quality we must increase for our successors, not necessarily by invention, but certainly by resistance to error. This, after all (it seems almost too simple), is the object of science—accumulation of truth, destruction of falsehood. The latter part of the doctrine is not so easy as it may seem at first. The exact sciences are pretty free from many sources of error to which the less certain are exposed. Medicine is not so much a science as a science of sciences. Chemistry, dynamics, electricity, &c., have all to be collated to the special studies. Each of these is in an imperfect state, and have come to the attention of the more leisure-loving and pleasure-seeking classes, to whose imagination rather than intellect they appeal. Among these people originated such a wave of pseudo-science as has in the last twenty years passed over us, and is beginning to decline. The phase commences very easily and harmlessly. Perhaps a lecturer gifted with easy eloquence explains the most abstruse truths in chemistry or electricity in such simple language that his audience think they understand him, and illustrates his teaching with the most difficult experiments, performed so beautifully as to look perfectly easy. Delighted with the apparent simplicity of science, and not aware that to perform truly these experiments machines as precise as mathematics and hands as delicate as a Faraday's are required, the fair audience repeat—aye, exceed—the marvels they have witnessed with a stay-lace and a bodkin. But the minutiæ of science are apt to be dull; something more exciting is soon required. A swarm of mesmerisers, clairvoyants, electro-biologists, and at last spirit-rappers, invade the town. The taste for the marvellous grows by what it feeds on, until the height of absurdity is probably reached in the supposition that disembodied spirits should delight themselves in the company of two mountebanks, tied up in a cupboard, by playing "Sally, come up" and other graceless melodies on a vile guitar and a wheezy accordion.

Such are the results which the flashy genius of pseudo-science wins—the aspirations which disdain the steady lead of truth, which claim a world beyond mere reason, end in pitiful juggling with ropes and banjos or tapping on tables at 10*s.* 6*d.* per hour; while men whose names were unwhispered in the 'at homes' of the season have almost proved the oneness of all forces, have made the lightning our despatch postman, and have laid a path for intelligence under the roots of the ocean.

The moral of this history is re-enacted with even greater force in our own profession. Medicine is, as has been already said, a science of sciences; but its application is an art. It is one thing to have all possible knowledge of a disease; it is another to perceive what is the matter with a patient; a third to prescribe suitable remedies; and a fourth to get fairly and properly paid for the work: and sometimes, I assure you, this is the most difficult of all the four.

Successful and righteous practice of our profession requires, then, a somewhat rare combination of qualities: power of steady work and close reasoning, rapid and sure perceptives, quickness and plenty of resource, decision yet tenderness of character, also great tact combined with the purest honesty. This latter union of qualifications requires some consideration. Tact itself is difficult to define, and so impossible to impart that there is no college upon earth where such philosophy is taught. The world is its university; experience its only professor. This quality, however, must be most carefully guarded; for it easily tends to, or at all events tempts to, insincerity and to humbug. Hence I have, in the above sentence, conjoined with it the name of honesty; and here my present subject connects itself with the table-rapping and rope-twisting individuals already mentioned.

Unfortunately, the confines of medical practice are haunted by a host of unrealities. The public, knowing nothing of our most abstruse and difficult science, yet constantly coming across the art, has little power of discrimination, and is easily led away by the marvellous and the occult. A host of people are quite ready to take advantage of this feeling who are not, I am sorry to say, extra-professional; indeed, they form a long-linked chain, from the homœopathic and bill-distributing quack upward. Hence the many anatomical museums (so-called), mesmeric, homœopathic, and sundry singular and startling special hospitals. Lest I be misunderstood, it is necessary to point out that a few special hospitals are allowable, even desirable—such as fever, small-pox, consumption, children's, perhaps eye hospitals, and one or two others. But, as a general rule, such institutions are vicious in practice and principle. Firstly, because those who get them up generally do so, not because they know more of the peculiar malady, but simply to connect their name with a certain disease; secondly, because when we have hospitals for all subdivisions of malady we throw on the public the task of diagnosing their own cases. And when hereto are added dispensaries for the administration of particular modes of cure, we leave to them also the choice of their own remedies—functions which they cannot possibly fulfil. If, however, we were to judge of the value of these institutions by the numbers of patients professed to be treated in them, we should have to form a most brilliant idea of their usefulness; but the slightest examination will show that the number of persons advertised as treated in one month probably exceeds, or at least equals, the number of individuals afflicted in the course of a whole year.

Glitter without gold is but a false light. Your aim—the aim of all of us—to be successful practitioners is not to blind us to the higher duty of liquidating that debt which we owe to posterity. Let us all set ourselves resolutely against falsehood and pretence, remembering always that a lie is the more dangerous the nearer its approach to truth. We all of us can aid the progress of knowledge by such action, even though we can invent nothing new; for it is not to be an object with all of us to invent new things. And you, gentlemen, will at all events have to begin with learning what is old. A glance at the prospectus will show you that your brains and time will be pretty heavily taxed; but you will soon feel within you the increase of knowledge if, when you study, you do it with all your might. When you play, amuse yourselves with your whole energy. Neither work nor play is worth anything if they be mixed together.

I must now speak of changes in the hospital staff and school. We have to regret the loss of a good colleague and teacher in Dr. Willshire, who has departed for Italy: we must regret him with but a modified sorrow, as one gone to another and a better place—at least let us hope he will like it better; moreover we can afford but a moderate sorrow, since his place is so amply, perhaps more than filled by the full and assistant physicians elected into the vacancy. In Dr. Salter's hands the medical lectures we know are fully safe; while the physiological lectureship will receive perfect justice from the hands of Dr. Morris Tonge. Dr. Pollock and Dr. Parsons will respectively teach pathological anatomy and midwifery, and in them we welcome good colleagues about to become good friends. Mr. Hancock has yielded half the surgical chair to Mr. Canton, whereby you will have the advantage of hearing the theoretical and seeing the practical teaching of both surgeons. In consequence of the last change, the chair of anatomy devolves upon me. I shall do my best to fill it worthily, and to lecture on that subject thoroughly and well; at all events, if you work as hard to learn your anatomy as I, together with our demonstrator, Mr. Bellamy, shall do to teach it you, we shall send an uncommonly good lot of students to the College examinations.

As, then, I shall so soon have the pleasure of meeting most of you again, not only, as heretofore, in practical surgical teaching, but in the anatomical lectures also, I do not take my leave of you, but simply say to you, *Au revoir*.

ST. GEORGE'S HOSPITAL.

DR. OGLE'S INTRODUCTORY ADDRESS.

THE lecturer said that on mature reflection it had appeared to him that an introductory lecture was not the opportunity, as some had accounted it, for a dissertation upon any abstract philosophical or transcendental theme, nor the fit occasion for a tirade, which to so many was a mere platitude, on such questions as medical education and discipline in the reform and organization of the profession. He thought he should act most serviceably in making his remarks as plain-spoken and as practically subservient as possible to the personal requirements of the majority of those present, bearing in mind the immediate objects which in that place of education they always had in view, not, however, forgetting the adage, "*Difficile est proprie communia dicere.*" First, there were the veterans

amongst them—the Nestors or Coryphei, if the term might be allowed—to whom experience with length of days had secured the respect of the profession, the only tribunal whose judgment was decisive, and the suffrages and the gratitude of the public. They could scarcely forget their former impressions and requirements in that place, and would welcome as future compeers those who sought to tread in their steps and to emulate their example. Secondly, there were those who, having fulfilled their course of required study, and being freed from the necessary restrictions of the pupil life, were starting for the course which was before them in the world. Then came those who, not having yet attained to the position of the latter, were nevertheless anxiously expecting it, and looking for the rewards of their exertions, being as yet immersed in the numerous and important studies of their curriculum. And lastly, but by no means least in importance, were those who, having determined as to their choice of profession, now came forward and enlisted in those ranks to which all present were so proud of belonging. He must congratulate them on the choice they had made of that hospital. In addition to the many advantages which were there to be obtained, he might be allowed to state that he believed the facilities for prosecuting study and for observation which were open there to all students were unequalled in any other metropolitan hospital. He alluded especially to the almost unrestricted access to the patients at all hours. In this they had to thank the wise permission of the board of governors of the hospital, who knew how much it was to the well-being of their charitable institution that highly-trained and efficient medical men should grow up within its walls. They were awaiting the completion of structural and other arrangements, which would enhance still further the value of the advantages offered. At the beginning of their career the question for them to ask and to be informed upon was, What was disease?—which it would be their business to learn to treat, to combat, and to subdue. They would have to divest their minds, as far as possible, of popular theories on this subject, and to bring scientific thought to bear upon it. It would be foreign to his present object to enter into any consideration of the various agencies by which the disturbance of functions was induced, but it was in the clear realisation of the truth that the correctness of their thoughts as to the treatment of disease must depend. This was a matter which was at the very threshold of all their practical inquiries, and would meet them, so to say, at every turn; and it was one which, he conceived, would be, by the novice at any rate, almost entirely misunderstood. Intimately connected with this consideration was, of course, the abstruse question of the origin and nature of that upon which health (the opposite of disease) depended—namely, the principle of life. Happily they had not in their studies, either in physical or metaphysical inquiries, to agitate themselves on such matters, diving as it were into the arcana of eternity; but there was an allied question which still vexed not only philosophical thinkers and historians, but also observers of the present moment, to which—though it would probably be never settled to the satisfaction of all—he would briefly allude. It was one which had lately, and would also for the future, occupy the attention of medical men and of physical inquirers, as its interest was much enhanced by the advance which had lately been made in their knowledge of the so-called physical forces, and especially of their conservancy and correlation. The inquiry was whether there was such a thing as vital force or vital energy, and whether they might rightly speak of vital processes. These were terms which until lately were constantly on their lips as physicians and physiologists. The present tendency was, no doubt, to discard them from the medical vocabulary. Modern enlightenment and direct experiment had shown that many actions and functions which could not formerly be understood as depending upon physical phenomena, that is, on phenomena witnessed in matter or substance unconnected with what was termed organic life, and which were, therefore, ascribed to some peculiar power or force superadded to physical actions, really depended upon such actions, and on such alone; whilst recognising that many of these actions, such, for example, as digestion, respiration, the power of forming and maintaining the temperature of the body termed "innate heat," were physical actions. It was very clear, nevertheless, that at any rate a large number of the processes of what was called life could not even yet be explained on merely physical principles, such as they knew them. For his own part, irrespective of the moral or theological tendencies of objections, even if all the processes which they termed functions of organs or parts were positively found to be referable to, and could be ranged under, physical actions, he should still detect something additional, and wholly different from them in the mode in which they acted together. After pursuing this subject at much length and with great ability, Dr. Ogle touched on the means they employed for checking disease—namely, the practice of medicine. Physiology and anatomy—that is, a knowledge of the laws regulating healthy conditions and functions—were the basis of pathology; and to claim for their practice more of a scientific or logical character than was warranted by fact, was simply self-deception or charlatanism. The greater part of the practice of physic rested upon experience, and was, in the best sense of the word, empirical. Dr. Ogle strongly recommended patience and perseverance. They were entering a profession than which none was more varied in character, none more interesting in detail. No profession demanded of its members more clearness of conception, more ready command of knowledge, and, therefore, it was well that they should entertain the deepest sense of their responsibilities. He earnestly advised them never to let go of the golden thread of Christian sympathy.

GUY'S HOSPITAL.

INTRODUCTORY LECTURE BY THE RIGHT HON. SIR LAURENCE PEEL.

AFTER an explanation of his reasons for addressing his hearers the lecturer said he had little to offer that was new, and he did not aim at novelty, nor did he desire to make a sensational address. He would speak unreservedly and freely, and pour out all homely "as plain as downright Sheppen or as old Montaigne." He had not crammed himself for his address, nor stuffed himself out for his part to carry a portly paunch of learning. He had read nothing specially for it. Sudden ingesta were not learning. What he had to say consisted, at all events, of mature opinions. Moore had written in praise of praise. Within proper limits it was a useful stimulant to virtue. A lecturer could seldom know individuals. He must generalise in his observations, and the hearer must apply and appropriate the lesson. The first piece of knowledge he should exhort them to try for was self-knowledge; from that might grow knowledge of men. They must look inward. The medical profession stood deservedly high, and it could be injured only by itself. The way to support it was to feed its springs. The medical schools of London were its springs—their food was knowledge. The students were offered the food; they must take it, chew it, and digest it. Sir William Temple thought physicians the most learned of the three faculties. Dr. Johnson, without express dissent from that preference, hesitated to adopt it, but he had bestowed a just analogy on physicians, and he lived in close intimacy with several. To qualify themselves for their profession they should be good men, learned men, and liberal-minded gentlemen. For models they need not go far, for the walls of that hospital included many such. They should guard the dignity of their profession with a jealous care, and understand on what it rested. It rested on services to mankind, the justifying cause of dignified position. To the honour of medical men were entrusted the keys of the skeleton closets in many houses, and the deposit was rarely abused. By virtue, learning, and manners united they maintained an influence which would be lost without that union. There was a time, however, when this profession, now so honoured, was the butt of ridicule. Satirists, in essays, dramas, and novels, delighted to level at it their shafts of ridicule, and the world clapped their hands and laughed. Why? It might be useful to seek for the cause. The weaknesses which then were ridiculed were not limited to this profession only. The world partook of them. A superstitious reverence for old times and opinions, for the practice of the ancients, a pedantic adherence to routine, and a determination to confess no error, and, consequently, to oppose all new discoveries, lost them for a time the respect of thinking people; and, as the lives of men were at stake, bitter was the derision when those weak points were exposed. Infidelity was at one time imputed to medical men: against them the charge was hushed, but it was renewed against men of science, many of them distinguished alike by their profound science and by the simplicity, purity, unselfishness, and labour of their lives. Science was not a jealous mistress, she did not ask them always to be at her elbow. Let them give sufficient time to study; let them avoid all that detracted from that fair allowance. Let them choose pleasures suited to their age, strength, and means, and make no laws for their companions. The world was a great

partnership, God had so worked it. Ignorance made ligatures which cut into the flesh; it was the parent of prejudice, and by its obstruction to improvements was as fatal as a pestilence. Molière had touched the matter freely in "Le Malade Imaginaire;" the promising son would not even listen to the new discovery of the circulation of the blood. In "Gil Blas" and in "Don Quixote" the same vein of irony was opened by Cervantes with his accustomed high breeding. Selden in his "Table Talk" hinted why simple medicines were at a discount. They were unpopular because simple and plain, and one saw it daily exemplified. In Barataria this was the golden rule—"Difficilissimum saluberrimum." Proscribe what was, and prescribe what was not, at hand; if they ordered what was cheap men would think cheaply of them. The old Duke of Queensberry, a vicious but a shrewd man, had a good motto in matters of taste—"De grand simple." A return to nature had sent old recipes, spring physic and spring diet, to Coventry. The reformation had spread. They no longer ransacked the entrails of birds and beasts nor all receptacles of filth to feed auriculas. The vine was reputed a gross feeder. One man buried a coach-horse under his vine border, perhaps to take his horseflesh in an elegant and liquid form. The list of melancholy meals in Burton's "Anatomy of Melancholy" by its very extravagance turned melancholy into mirth. The doctor and governor of Barataria quoted very learned opinions for his theories, but students now were to be congratulated that they were born in the age of reason. The lecturer proceeded to give some excellent advice to the students. They were not to be in a hurry to come out, like a miss in her teens, but should endeavour to lay good foundations; for they did not want men, like the Irish students in "Gil Blas," to be foaming at the mouth with theses and arguments. Nothing would stick long by them which was not in a measure worked into them by themselves, nor do them much good unless it was based on principles. They did not think much of a case lawyer; let them not, then, be case physicians, but saturate their minds with principles. Let them pick up all the knowledge they could, for a German story said that even a rusty horseshoe might buy some cherries. Let them take care how they walked, and with whom. It was difficult to keep step with a fool. Slang was a mistake on the part of a scholar and a gentleman. It was a poor imitation, and the true blackguard could do it better. Chaff might be wit or humour; if so it might pass, but one did not often meet with that sort of chaff-cutter. Sidney Smith laughed many nuisances out of the world, but he was a close reasoner, and knew when to use his tools. In conclusion, he expressed a hope that the professors in the school would show the young men about them that they were students still, that theirs was apt philosophy, which never rested, which was never attained, which was never perfect; that its law was progress; that a point which yesterday was invisible was its goal to-day, and might be its starting-point to-morrow. These words, which were part of Lord Macaulay's "Essay on Bacon," were worthy alike of the essayist and his subject.

LONDON HOSPITAL.

INTRODUCTORY ADDRESS BY DR. HEAD.

AFTER giving the students a hearty welcome on that, the eighty-second anniversary of the foundation of the College, Dr. Head remarked, that while no institution affords more extensive relief to patients, none afforded to the student vaster fields for prosecuting his studies. While speaking of their noble hospital it was impossible to forget what a striking exemplification had been given in the effectiveness of its organization and resources by the manner in which they met, and by the blessing of God retarded, the westward progress of the dire cholera wave which had so lately broken over them. The important services undertaken by that institution were given with the utmost devotion, and he did not mention it now so much with the object of restating what was well known, as to express the gratification which he was sure the authorities of the hospital felt at the generous assistance of the generous public, whose free-will offerings visibly, now as ever, maintained the correctness of the phrase, "English generosity," throughout the world. Dr. Head passed a high eulogium on the resident medical staff, the house governor, the lady nurses and nurses, who had done their part so well. "These are not, however, mentioned on their own account, but on our own, that we in our turn may be encouraged to follow so noble an example, and that society may be elevated by the record that such deeds of self-sacrifice had been done in its midst. Mere love of human praise would never have induced men and women to act in this manner; the praise of God, and the satisfaction of their own conscience, must be their own reward. And alas! gentlemen, if human praise were the only reward possible, some who have worked and suffered with us would be for ever unpaid for their labour. Of the nurses, four have succumbed to the terrible danger they dared." The lecturer referred also in appropriate terms to the death of Dr. Ansell, for many years the active chairman of the Drug Committee of the hospital, who fell a victim to this dire malady. Before passing from this subject, he mentioned that the Alexandra wing had been completed, and was to have been opened just when the cholera broke out. The house committee threw open the wards at once, and the building, which was to have been opened with congratulatory speeches and in festal array, in the presence of the rank, wealth, and beauty of the metropolis, was inaugurated, perhaps more suitably, amidst the threatenings of the pestilence and the ceaseless groans of the sick and dying.

The lecturer proceeded to address the students more especially, and observed that he would preface what he proposed saying to them by a word or two about science in general, and the only manner of successfully investigating her mysteries; and observed that although such definitions might not be necessary, yet it was a positive satisfaction in these days of scientific heresies to restate the ground on which the profession, as indeed all other branches of science, can alone continue to stand. He then went on to state that of science the profession of Medicine was one of the most important branches. "Its subject is, next to the knowledge of God, the highest that can be contemplated, for it concerns the knowledge of man physically and psychically, his relations to nature, and the various effects which the external world, its laws, its forces, and its productions, have upon him. It includes, therefore, the physical sciences of Anatomy, Physiology, Chemistry, Materia Medica, and so on. It is in consequence of this extended knowledge of Physics which it is necessary for him to possess, that the medical man is called by the name, physician—a title which in all ages has demanded respect, and which one has as much reason to be proud of as any of the ephemeral titles bestowed by kings and governments."

Dr. Head exhorted the first-year's students to pay special attention to the subjects of their winter course, particularly anatomy. He observed that an extensive and profound knowledge of this subject was not only simply desirable, but absolutely necessary. Over the wall of his academy Plato, it is said, had inscribed, "Let no one but a mathematician enter here." On the wall of the temple of medical knowledge is engraved with a pen of iron, not only "Let no one but an anatomist enter," but "No one but an anatomist *can* enter." It is the magic key, the "Open, Sesame," which alone unlocks the portals, and enables us to gaze at and enter into the temple reared by hands untold, the labour of unknown ages. In reference to the dissecting-room, the lecturer spoke strongly on the propriety of maintaining quietness and decorum within its walls, observing that this was requisite, not only on account of the difficulty of the study, but also because all men in all ages who had respected themselves and been worthy of respect had respected the ashes of the dead—ruins indeed, but the ruins of a shrine just deserted by a spirit the most wonderful of the creation of God.

With regard to the disciplining of the mental powers requisite for the successful prosecution of medical science, the lecturer strongly insisted on the cultivation of the faculties, especially of concentration, memory, observation, and reflection. Concerning the gift of observation in particular, he remarked that the successful study of Medicine would depend very much on the exercise of their perceptive powers, inasmuch as this science, unlike some pure mathematics, ethics, and others that could be mentioned, which had their rudiments in the human mind, derived the material on which it was built entirely from the outer world. "Let no one, if he does not possess the gift to the extent he desires, and feels himself inferior in this matter to others, be dismayed, for it may be indefinitely improved by exercise; and, moreover, it should not be forgotten that facility in this, as in every other department of mental exertion, does not depend upon one faculty, but on many, and often principally on those developed last. A truly great observer is not, for instance, one who is simply quick in his senses, and active in his disposition; but one who has intellectual insight to distinguish and compare what phenomena he sees with the outward eye. Your original weakness in actual observation, though, perhaps, inferior to that of other

men, will in time be so assisted by your intellect, your knowledge, and other mental powers, that in the whole and at the last you may become infinitely greater and more successful observers of the mysteries of nature than the men that first caused you such serious discouragement."

After giving some practical advice as to the best manner of conducting their studies while members of the College, Dr. Head went on to point out the advantages, material, mental, and moral, which were sure to be obtained by a diligent discharge of the duties of the profession. With regard to the mental advantage, he observed that the number of years that medical students expend on some of the deepest and most interesting of sciences must needs enlighten and develop the powers of the intellect. With regard to moral influence, what could be more softening, what more humanizing, than the exercise of their profession, or what afford more stimulus to the common benevolent feelings of our nature? Not less beneficial was the influence exerted by the study of their profession on religious principles. This was not generally allowed, but still it was the case, and was shown more and more by facts to be so. The lecturer pointed out, in reference to this, the evidences that the study of medicine afforded of the wisdom, power, and goodness of the Creator, and showed that this must needs have a strong influence in predisposing the mind towards the reception of revelation.

The lecturer concluded his address by urging on the students to discharge with all diligence the duties they had undertaken. "By so doing," he said, "you will raise yourselves to the envied position of the trusted, honoured, scientific, successful practitioner. You will maintain the dignity of your College, and give your teachers the best encouragement and reward they can obtain for their labours. You will make amends to friends and relatives for the anxiety and expense they have been put to on your account. You will enjoy in your own breasts the satisfaction and peace that duty well done is sure to bring. Only, gentlemen, work; and work will be changed into interest, and interest developed into attachment, and attachment transfigured into love, and love will easily conquer all difficulties that beset your career. *Nihil difficile amanti.*"

ST. MARY'S HOSPITAL.

MR. HAYNES WALTON'S INTRODUCTORY LECTURE.

AFTER greeting the very large audience who attended the hospital, the lecturer remarked that it was well to meet and rejoice at this medical festival and anniversary, one of the few that the profession possessed, and the birthday of all who have entered medical life in London, and to introduce with proper care many of those who are about to enter the noble brotherhood, and indeed to make the beginning a consecration. He had not looked back among the great men of the past for examples to set before them, neither had he gathered fragments from medical history to amuse them, nor sought quotations from classical authors to astonish them; he gave merely his experience in a few sober truths delivered in plain language.

Following that rule of order which says "seniors first," he addressed himself to the many physicians and surgeons present, and attributed the goodly gathering of them to the fellowship which the laws of St. Mary's have established between the profession, the hospital, and the school, adding that it deserved to be well known that the medical governors of the hospital take part as committee-men in all that concerns practice and teaching; in such committees they act on the same footing as the regular medical officers. He asked them in the name of his *confrères* to continue to join heartily in the work, and to assist in the many questions that were ever requiring to be answered. He assured them that the demon jealousy would not pursue them, that many improvements might enter more readily through them, and any neglect or abuse would be the quicker and smoother put down by their assistance. The student would forcibly recognise whatever of good supervision emanated from them, as there could be no secret working among the staff, no unchecked selfishness, therefore no corroding suspicion. He thanked them for what they had done, as science, suffering humanity, and the students benefited by them.

In addressing himself to the younger part of his hearers, the pupils and new-comers, he thought it well to tell them something about their educational home—to cast a retrospective eye, and to allude to the things that be. It was right that the history of the establishment be unfolded to them at this time, fifteen years from its organization, and that the present policy be developed. There had been no failures. In the past was registered merely the difficulty of a commencement; the present records the triumph of success. He then gave a sketch of the prosperous career of the hospital, and alluded to the enlargement in the new wing which is being built, and spoke also of its internal arrangements and organization. The marked success of the school was then pointed out, and which he considered more astonishing than that of the hospital, as the conditions necessary for its prosperity were of a different nature and more difficult to be reached. No happy accident brought this about, but causes clearly to be traced; and he thought he ought not to be debarred from alluding to the chief of these on account of their personal nature and because of his being associated with the actors. Justice and truth inoffensively put forth should always be admissible. The most promising features, then, in the new hospital were the largeness and completeness of its staff and the high reputation of the individual members for teaching, writing, and practical knowledge; also, that St. Mary's is well represented in the profession, as the examining boards of our colleges and other bodies testify. It stood high in public estimation. It pleased our gracious Queen to look there for some to attend her and those most dear to her.

He pointed out that the general proficiency of the students who had been educated there had been the subject of remark by examiners and in private life.

In honour's list they had not disappointed their professors. A large number had sought the competitive examinations, and entered the public services—a fact which showed these men had confidence in their acquirements.

In all that concerns the school in the coming session in legislation and administration, all had been done that could be done for the student's welfare. And to render his teaching as complete and as easy as possible, it need to be told the students, for it was scarcely well understood, that the work was not all on their side; the teachers had a great deal of care, labour, and fatigue, and in many instances more than they. The teaching of elementary matter was always drudgery to a proficient in his subject, and he hoped the remembrance of this would be a check to any restless spirit there might be in a lecture-room. The student of the present day has everything to his hand; in his (the lecturer's) time it was not so.

Mr. Walton then alluded to the long period that had elapsed without change in the medical staff. For years it was unaltered, and even now the old faces abound. It was not till late this year that death had entered its ranks; and now it fell to his lot, in the capacity of a public lecturer, to notice the sad calamity, and to allude to the solemn end of our nature, which all healthy minds regard with instinctive dread. He next gave a short biographical sketch of his late colleagues, Mr. Alex. Ure and Mr. Joseph Toynbee.

He then turned to the youngest of his hearers—the freshmen—who that day had taken the most momentous step in their life, and begged that earnest attention which would assure the remembrance of some portion at least of this address to them. They needed guidance and assistance, as that which they were to master demanded a great deal of mental work, and was harder because it was entirely different from anything in which they had been engaged. The first obstacle to be encountered was the apparent magnitude of the task; but he begged them not to be discouraged, as he had felt it as much as anyone, and assured them that in three or four months the phantom fright would vanish—that is, if they began in earnest,—and that they would be amused at their past fears, although then only would they recognise the amount to be done. Yet there must be work—positive downright hard work: a thing difficult to be understood by youth, and still harder for those who have not had that mental training which should be preliminary to medical education. There are few studies more difficult than those in which they had to engage; and more would be required of them during the next three or four years in mental training and the acquirement of knowledge than at any other period of their lives. The subjects were numerous, lengthened, and intricate; and the sooner they knew this the better. The practice of medicine was not a mere empirical art—not a mere routine. At the present time there was no more varied or difficult curriculum anywhere established than was required in this country from the candidate for the medical profession.

During that period their character would have to be formed—a work of self-culture and self-development—for it could come only of themselves—a result of more importance to the man individually, and of scarcely less consequence to his future patients,

than the scientific instructions to be received. "What is knowledge without character? I do not mean possession of the moral virtues, but the cast of mind, the force, the will, the habits of thought and feeling which distinguish a man from his fellows in the affairs of life. Ponder well on this. Remember, according as you sow so shall you reap. With all your desire to learn, you must be taught how to proceed, for rule and discipline are necessary. As with physical labour so it is with mental: sharp and severe spirits will be lost in the end, and cause damage to the living machine. In the mental exercise it is the daily little taken in freshly that holds; a fatigued mind can never retain."

The lecturer here gave some valuable hints about the hours of study, the division of time, and the surest method of proceeding.

Mr. Walton then proceeded to discuss the importance of anatomy and physiology to the surgeon, without a competent knowledge of which he would be unfit to practise his art. He meant really practical anatomy, a knowledge of which could be obtained only in the dissecting-room, and which pursuit, though at first uninviting, would eventually become one of much interest. He besought the students to be regular and attentive in their hospital practice; and he advised them to gather facts for themselves, and gain experience. He insisted upon the necessity of students operating frequently on the dead body, and regretted that this branch of surgical education was so much neglected. The lecturer concluded his address with an eloquent appeal to his hearers to be diligent, frugal, and self-denying.

ST. THOMAS'S HOSPITAL.

INTRODUCTORY ADDRESS BY DR. BARKER.

THE lecturer commenced his address by disclaiming any intention of rivalling those who had addressed similar audiences in former years, inasmuch as he intended to confine his remarks entirely to those matters which concerned medical students, especially those who were commencing their studies; these remarks necessarily being such as could have little of interest to many who were then present, a large number of whom were not connected with the medical profession.

He pointed out, in the first place, to pupils in their second or third year of study, that they would leave the school with their object in attending a school attached to an hospital altogether unattained, unless, when duly qualified by the instruction received in their first year, they diligently attended the practice of the medical officers. No amount of industry or talent, and no accuracy of memory relating to all they read or heard in lectures, would enable them to recognise disease; they must make, as it were, a personal acquaintance with it in the wards of an hospital; and unless they took the present opportunity of making this acquaintance, whilst they could do so under the eye and with the guidance of those who could teach them, they must afterwards do it alone, slowly and imperfectly, amidst doubts and difficulties, and with risk to their own reputations and their patients' lives.

The backwardness of many of the best pupils to attend regularly in the wards might be traced to various causes. First, a belief that reading was sufficient; that descriptions of disease in books and lectures seemed so clear and distinct that mistake in recognising them when met was impossible. Illustrations of the error of such an opinion were given. Secondly, a want of exact resemblance between what had been read of disease in books, and what disease was when seen in the wards. Thirdly, the varieties of the features of disease being so great, that no amount of hospital attendance could, in a pupil's short career, make him acquainted with more than a comparatively small number of them. The lecturer admitted that these were grounds of discouragement; but, without entering into any verbal argument, he asked the pupils to accept his assurance, as an old teacher, that with a little perseverance they would gain courage, and that, a few difficulties overcome, they would find themselves almost at home with forms of disease they had never seen before.

The lecturer spoke of his experience as an examiner for the licence of the College of Physicians: that those who wrote the best papers in answer to written questions, though generally the most at home, were sometimes the most astray when examined at the bedside of a patient; and that it was easy to distinguish those who had, from those who had not, been diligent in the wards.

Turning to the first-year's students, the lecturer told them that his remarks, apparently addressed to more advanced pupils, were really meant for them; that now was the time which must determine their fate; that as a want of attendance on the wards was equivalent to a loss of all the advantages of an hospital education, so was a want of diligence in their first year equivalent to the same, inasmuch as they would then enter the wards without that knowledge which alone would enable them to understand and profit by what they there saw and heard.

The lecturer also pointed out to the first-year's pupils the importance of giving equal attention to all branches of their early studies; and that, if they did not do so, they would, no matter how fully they might employ their time on some favourite subjects, in some respects resemble the idle student. The chief difference would be that, whilst the idle student in his second year would be like a man trying to mount a ladder with all the lower steps broken and rotten, the unequally industrious student would find a few steps sound.

The lecturer concluded with a few words of encouragement, and stated his belief that industry, energy, and honesty had as good a chance of success in the medical profession as in any other.

UNIVERSITY COLLEGE.

DR. SIDNEY RINGER'S ADDRESS.

AFTER some preliminary remarks on the importance of the commencement of a session to all, whether teachers or students, the lecturer addressed himself to those who that day were for the first time removed from home influences, and entrusted as it were with the guidance of their own affairs, and left very much to their own sense of what is right or wrong. They had now to show their self-respect by cultivating those habits which would bear the review of coming years and fit them to sustain their parts in enlarging the usefulness of their profession. He referred to the importance of the friendships which the new student might form with his older companions, and which might affect the future colour of his life. On the older students he urged the necessity of making the best use of what remained of their student life, and of recovering by increased diligence any opportunities of improvement they may have lost. The lecturer proceeded to say:—

"Every calling to which men devote their powers is made reputable by those who fit themselves for it, and duly perform the business which they undertake. But we do not expect them to restrict their thoughts to the occupations which lawfully engage the greater part of their time. A costermonger, no less than a prince, may entertain a juster idea of life than would be expressed by skill in petty bargaining, or in the art of governing a nation; and may, with benefit to himself and others, use that idea to dignify his customary work by the new motives it supplies. And if any man ought to entertain a lofty idea of life, and then ought to work consistently with it, even in the details of his ordinary occupation, much more is it to be expected that we—who have devoted ourselves to the study of an art and a science which propose the alleviation of human suffering in all its physical manifestations—should cherish such an idea as to our own lives, and be anxious to prove ourselves worthy of that confidence in connexion with our future practice which successful study may prepare us to secure. We are to be in contact with persons to a greater or less extent shut out by accident or disease from the social intercourse to which they have been accustomed; and they will have to divulge to us particulars as to their actual state and previous habits of life, which will establish a higher relationship between them and ourselves than merely professional attendance begets, and which will give us, if we deserve it, a hold upon their friendship and esteem, which we may use to their advantage in many ways. The dignity and importance of our profession, consequently, require us to be men whose habits and tastes shall be as refined as our professional knowledge is exact and comprehensive. The greater our proficiency in our special studies, the more urgent is the need of that high-toned and chivalrous feeling which will enable us to compassionate and relieve the weak, without making them conscious that we stoop to raise them, and will give us energy to do and dare whatever we feel to be right. For the man who really respects himself can never be wanting in due consideration for others; and he who loses his self-respect cannot hope to win the attachment or confidence of others.

"We meet together, therefore, at the commencement of our

academical year, to hold out the hand of fellowship to those who join us to-day for the first time; and also to give each other assurances of our personal sympathy, and of our readiness to work together for our mutual advancement and for the honour of our school."

After speaking of the influence of education in revealing the stuff a man is made of, by bringing into play those gifts of nature which, when uncultivated, are little more than mere waste power, and enabling a man to sustain with efficiency the various demands which can fairly be made upon him, Dr. Ringer proceeded to show the mutual influence which the body and mind exert upon each other; and spoke in eloquent and striking terms of the prime importance of the *mens sana in corpore sano*. He urged upon his hearers that it was their paramount duty, by self-control, self-denial, and active efforts, to maintain a healthy and pure state of mind and body. After dwelling with much force on the influence of habit, he said: "But habits are chiefly formed under the influence of our companions. Whilst we have dwelt at home our habits have been under the watchful care of others; and to a large extent do, when we enter the world, but reproduce the impression made upon us by the teaching and example of our parents and teachers. But now that we have entered upon a larger sphere of thought and a freer range of action than we have been accustomed to in our life at home, we are in danger of forgetting the stealthy influence of example itself upon us. Yet there can be no doubt but that we adapt ourselves as best we can to the society we choose to frequent; and that we generally catch its tone, and become at last little better than mirrors to reflect its opinions and pursuits. To do this, many a man has changed his habits most completely, although almost unconsciously; for he has adapted himself to his new companions point by point, yielded scruple after scruple, and has made concessions in questions of principle and rules of conduct, under the influence of the example of others, which neither solicitation nor cajolery could have won from him." He dwelt at some length, and with much earnestness, on the importance of choosing proper companions and friends; and said that the most profit and the greatest pleasures were gained from a few well-selected friendships rather than from a widely-extended acquaintance.

With respect to the education of the medical practitioner, the lecturer said: "It requires for its completeness much more than a familiarity with professional studies of all kinds; and you will find it as necessary, as it will be advantageous, to cultivate your minds by such other intellectual pursuits as are within your reach. It would be absurd to lay down a rule for men of such varied habits of thought as usually meet at such times as these; but it may be suggested, as of much importance to us all, that whatever course of study we undertake, in addition to, and by the side of, our regular class and other work here, should be marked by the same thoroughness which alone ensures our professional success. A studious man will use the lighter literature of the times as he does sweetmeats and syllabubs—not as a substitute for the solid food that he needs, but as the agreeable accompaniments of a good dinner. The one thing to be guarded and preserved if possible by us all, is true healthiness of mind; and we are free to use any and every kind of mental food which nourishes our powers, and makes them fit for the duties of life. Anything that unfits a man for the business of life is to be shunned as so much poison."

The lecturer concluded an able and interesting address, which was listened to with the greatest attention, in the following words:—

"It is only by cheerful conformity to the laws which are designed to provide for our well-being that we shall attain to the tranquil enjoyments which are offered to us, and which may be enjoyed as the fruits of unselfish and consequently useful lives; for happiness and usefulness are correlative terms. Every act that honourably secures what is useful for ourselves, or confers what is useful and therefore a benefit on others, is desirable; and such acts are alone permissible. Those which merely please us for the moment and destroy monotony are to be avoided as harmful and wrong. If we act upon this principle, each day will leave us wiser, happier, and better than it found us; our intellects will improve, and our sources of pleasure increase: for our minds will become a storehouse into which we shall constantly gather the materials of our happiness. With the man whose life has been rightly spent, the joys of middle age far outweigh those of youth or childhood, great as these may be. In fact, as our years pass on, we may thus make ourselves free, to a great extent, of outward things; for we shall gather up memories of the past and grateful associations which will be in accordance with our virtuous longings and high instincts; and the mind may then turn in on herself, and be independent of place and circumstance. We can create a world within ourselves. We can thus fit ourselves for old age, when our senses will become dimmed and our minds obscured, and when nothing will be left to give us pleasure but memories of the past and hopes for the future.

"But now let us consider the means by which we may develop our physical powers to the utmost, and by which we can best secure the healthy enjoyment of life on the one hand, and fit ourselves for our professional duties on the other. On this account muscular pursuits should in no wise be neglected by any of us; for such exercise is essential to the health of the body, and is especially required by us in our younger years. The amount of exercise that must be taken should be regulated by the nature of our occupations. It is estimated that a man, in order to maintain robust health, should take exercise equal to a walk of nine miles a day; but much of this is accomplished during the performance of most men's daily callings. Thus exercise equal to a walk of three or four miles a day may be sufficient for us. Cricket, racquets, and especially gymnastic exercises, may with benefit be engaged in, always with the reservation that we resist their too great attraction, and that they in no way encroach on our work. But physical exercise has the further recommendation that it exerts a beneficial influence on the mind and body. Only those who lead active lives know the pleasure of gentle fatigue, which disposes to the various tender emotions. These are called into play when, under the influence of the exhaustion produced by our active occupation, we seek the society of our friends, or hold intercourse with our relatives, or with those dependent upon us. The calm suffused pleasure which we thus secure affects the body most beneficially, and promotes digestion, assimilation, and nutrition.

"But there are some other pursuits which you may indulge in, and find to be useful in your profession in various ways. I content myself to-day with recommending to you, on this ground, the study of music, not merely as a means of agreeable recreation, but as enabling us to detect more readily and correctly the physical signs—as in chest diseases—upon which our diagnosis of the condition of our patients must greatly depend; and also as assisting us in the treatment of some cases. It would be a ridiculous waste of time to expatiate on the wonderful power of music to excite or to soothe our spirits; and I prefer, in a few closing words, to leave on your minds the impression that an ear well trained to discern the pitch, quality, and time of musical compositions has an immense advantage over one that is untrained in all cases that call for auscultation. The more exquisitely cultivated is our sense of hearing, the better shall we perform the very anxious duties which, in such cases, fall to our lot; and of auscultation, as of all other processes by which we seek to arrive at the condition of things around us, we may fairly say, that what is worth doing at all is worth doing well.

"I have only further to express my earnest hope that your studies in this school of medicine may fit you to sustain with credit and efficiency the duties of our laborious and honourable profession; and that, to the extremest old age which any of you could desire to reach, you may be able to revert to the days when you worked here as students with the satisfaction which work honestly done and virtuous principles unflinchingly maintained will assuredly inspire in your hearts. We are all aware that the development of our physical powers is dependent on the nutrition we receive from our daily food, and on the muscular exertion which creates a demand for that food, and also determines to a great extent our ability to digest and assimilate it."

WESTMINSTER HOSPITAL.

INTRODUCTORY LECTURE BY DR. FINCHAM.

THE lecturer, after a few words of welcome to the older pupils, proceeded to address himself more particularly to those who were commencing their medical career; and first alluded to the higher standard of general education which was now insisted upon as preliminary to their special professional studies. "Do not," he said, "be discouraged by the apparent multiplicity of subjects to which you will have to direct your attention. To some, I know, this seems at first almost overwhelming, and they feel tempted to sit down in a sort of despair; but this is as unnecessary as it is wrong. There is

nothing so especially abstruse in the studies with which you will be occupied but that a young man of average abilities and a fair school education can perfectly master them, if he only will to do so. I say, a fair school education; and I trust that the regulations of the Medical Council, compelling all students to pass a preliminary examination in ordinary school subjects before they begin their specific medical career, will have the effect of sending up to the schools pupils who really are fit to begin their professional studies. This has not always been the case, unfortunately, in times past; and I am sure that all who have had to do with medical teaching have formerly very often lamented a sad want of common intellectual training in many of those who have entered our schools. Some, indeed, were deficient in the very rudiments of education: it was a hard matter for them to write a piece of decent English, and their spelling was not always in accordance with the received rules of orthography. But it was even worse than this. They did not seem to have the least idea of learning, much less of teaching themselves. Habits of memory, application, reflection, analysis—all were unknown; and instead of learning their profession, they spent most of their time in learning how to learn, if even they achieved this. But all this is, I trust, a thing of the past. Already the standard of preliminary education is sufficiently high to keep away from the ranks of medical students those who are manifestly unfit for any liberal profession; and by the resolutions of the Medical Council at their last session, this standard will be gradually raised still higher. And this, I believe, will be found a positive boon and advantage, not only to the profession generally, the tone and position of which will be unquestionably raised, but also to many young men who, were it not that this preliminary education is insisted on, might have entered a profession for which they never perhaps could properly qualify themselves, and which therefore must be practised under terrible disadvantages. Many a young man whose education has been neglected, or who from some cause or other has an inaptitude for intellectual pursuits, has cursed the day on which he entered one of those professions for the right study and practice of which a considerable amount of intellectual training is necessary. Such a one might have made a capital farmer or a first-rate colonist; but a doctor or a lawyer he never should have been."

The lecturer then proceeded to give a rapid sketch of the various sciences to which the student would have to give his attention, showing how they all bore upon the great object of his studies—the cure of disease and the alleviation of suffering. He pointed out the unreasonableness of thinking it possible to amend derangements of the structures or functions of the human body without a previous knowledge of them as they are in health; in other words, without being masters of anatomy and physiology. He urged, too, the study of chemistry, first for its bearing on physiology; secondly, for its direct help in the diagnosis and treatment of disease; and lastly, in its connexion with forensic medicine. The study of medicine and surgery themselves was next considered, and the necessity of attending systematic lectures on these subjects insisted upon as introductions to the most important point to which the student must direct his attention—viz., clinical teaching and study. He showed how essential was this last, and how impossible it was to become a good physician or surgeon without it, just as without dissections it was impossible to become a good anatomist.

Having thus touched upon the various subjects which occupy the student both in the lecture-room and the hospital, Dr. Fincham next alluded to his duties and occupations when at home. "First of all," he said, "I should strongly advise those of you who take notes of lectures—and a most useful practice it is—to write out these notes on your return home, with such additions as your memory can supply. This is a most valuable exercise, and tends more than anything else to fix the topics of the lecture in your minds. There is no better test of a man's knowledge of any subject than his ability to state it in definite categorical propositions committed to writing. This will show what he does and what he does not know. Ascertain then what you have really learnt at lecture in this way. And now as to reading. There can be no doubt that you ought to have a good work on each science upon which you are engaged. I shall leave it, however, to your various lecturers to tell you what these works should be. I would rather remind you that, just as there is all the difference between lounging about the wards and clinical study, so there is all the difference between looking at a book and mastering its contents. One of the greatest thinkers of the last century in this country, Bishop Butler, thus speaks of that shallow desultory mode of reading which is, I believe, one of the great evils of the present day. Were he living now, instead of upwards of a hundred years ago, he would doubtless have denounced it in still stronger terms. He says: 'The great number of books and papers of amusement which of one kind or another daily come in one's way, have in part occasioned, and most perfectly fall in with and humour, this idle way of reading and considering things. By this means time, even in solitude, is happily got rid of without the pain of attention; neither is any part of it more put to the account of idleness—one can scarce forbear saying—is spent with less thought, than great part of that which is spent in reading.' Do not, then, read in this desultory mode, allowing ideas to pass through your minds, but making no effort to realise them and make them your own; and do not delude yourselves by supposing that, because the work you have before you is a solid one, you therefore are well and solidly engaged in reading. You may skim a solid book just as readily as you may skim a novel, and with just the same amount of waste of time and injury to your mental powers. Far better would it be for you to read now and then positively for amusement some good work of fiction, than habitually to read, even the deepest work, without making an effort to master its contents. Read, then, a few books, but read them well. Bear in mind the old proverb, 'Cave hominem unius libri.' It expresses exactly what I want you to realise—that a man who has mastered a few books thoroughly is infinitely superior to one who has read hundreds carelessly,—that he is infinitely more to be feared as an intellectual antagonist, because he has acquired active habits of thought, instead of being content with receiving passive impressions of subjects which have merely flitted before his mental gaze, but have left no abiding stamp behind them."

Dr. Fincham then went on to speak of the important subject of recreation in the following terms:—"On this point the first thing to bear in mind is, that habitual idleness is incompatible with the idea of recreation. For what does recreation mean? The word speaks for itself. It means a creation afresh—a renewal. Unless, therefore, mind or body, or both, are more or less fatigued and worn, there can be no need of, no right to, recreation. The idle boy or man has exhausted nothing; there is nothing therefore which wants renewal. The industrious student, however, has a full right to recreation; nay, it is his duty from time to time to unstring the bow of mental effort, in the positive interest of his professional advancement. He will work all the better for good wholesome play, just as he will play all the better for his previous work."

In continuation of this subject, the lecturer alluded to the many sources of amusement and instruction now to be found in the metropolis, and of which the student can avail himself without the slightest risk of deteriorating his moral character. He urged also the advantages of short excursions into the country, during the spring and summer months, on the Saturday half-holiday; but, above all, he insisted upon change of mental occupation as one of the best means of recreation. "Artisans," he said, "who have been using their muscles all day are often by no means disinclined to some athletic sport in the evening, and really find relief from it. So, too, the medical student who has been working hard at his anatomy and chemistry will be in no small degree refreshed by spending an hour or two occasionally on some totally different subject. In this way let him keep up his classical studies, or work at French or German. Let him read, too, instructive works—e. g., on history, or the biographies of great and good men. All these will be of use to him by enabling him to become the fit associate of educated persons, and also because they will help him to rise above a life of frivolity or of mere sensual gratification, by giving him an interest in something higher."

The lecturer, in conclusion, when contrasting the position of the medical profession with that of others, spoke encouragingly. "Of course," he said, "the practitioners of medicine will have to work; but so will every other professional man. I do hope, however, that in future years he will have less *drudgery* than has sometimes heretofore fallen to his lot. Thus I have great hopes that the position of parochial medical officers will be greatly improved, and that the just claims of military and naval surgeons will be no longer disregarded. Indeed, I feel sure that these changes *must* take place if such posts are to filled at all; for just in proportion as the standard of education, both professional and preliminary, of the medical practitioner is raised, so will be his reluctance to accept underpaid and degrading appointments."

After the lecture a *conversazione* was held in the board-room of the hospital, where many objects of professional interest were exhibited. Refreshments were served in the corridor.

AN ANALYSIS OF A HUNDRED AND FIFTY UNPUBLISHED CASES OF ASTHMA.

BY HYDE SALTER, M.D., F.R.S., F.R.C.P.,
PHYSICIAN TO CHARING-CROSS HOSPITAL.

No. II.

(*Concluded from p. 260.*)

ON THE IMMEDIATE EXCITANTS OF THE ASTHMATIC PAROXYSM.

Classification of the immediate excitants of asthma. A. Those affecting the air-tubes primarily and directly: 1, *particular kinds of air;* 2, *chemical and mechanical irritants;* 3, *animal emanations.*

THE largest group of all is furnished by materials inhaled. These may be divided, I think, into three classes:—1, particular kinds of air; 2, chemical and mechanical irritants; 3, certain (or rather, perhaps, I should say very *uncertain*) animal and vegetable emanations.

1. *Some inappreciable quality of air.*—This, one of the commonest exciting causes of asthma, is expressed in different ways and different degrees in different cases. In some cases change of air is the great thing. This is often felt at first going to a place, and only at first; the first night or two will be asthmatic, however well the place may afterwards agree. In another class of cases asthma is sure to come on if certain specified places are visited; they may be few or many, but whenever they are visited the asthma is sure to supervene. In many of my cases the individual places which bring on the asthma are mentioned: in one it always came on an hour or two after going into the country, in another going to Malvern always brought it on, in another Hampton Court, in another Denmark-hill, in another it was Brighton, in another a particular house at Matlock.

In another set of cases change of weather, without change of place, seems sufficient to excite the asthma; even change of wind. In some of my cases the special winds are mentioned: in one it will be east wind, in another south-east, in another any high wind, in another any cold wind.

And this brings me to another class of cases, in which the great thing that induced the asthma was cold—cold frosty weather, change of temperature from one room to another, being out in the night air. But I am not sure whether the cold air produces the asthma in these cases as the respired medium, irritating the air-tubes, or in the other ways which I have already mentioned.

In other cases a close air—as in a crowded room, a church, a railway carriage—is mentioned as that particularly apt to give rise to the asthma.

2. *Chemical and mechanical irritants.*—Dust is, of all mechanical irritants, that which I think most frequently recurs in my notes. Next to that comes smoke; the burning of a lucifer match would in many cases always bring on an attack. In one gentleman the smell of camphor would always bring on asthma, and in another the smell of sulphur. In another case stifling gases of any kind. One lady always had her symptoms induced by the smell of paint, and another whenever a bed was made in the room where she was. Dust from hay was particularly offensive in one instance, so that the patient could never go into a hayloft. Sneezing, speaking, and coughing must, as I have already mentioned, be considered mechanical irritants; they frequently occur in my notes.

3. *Animal and vegetable emanations.*—Perhaps the most curious, I might almost say incredible, incidents to be found in my notes, relate to the production of asthma by certain animal and vegetable emanations, especially animal. At the time of the publication of my work on Asthma, I was acquainted with only two animals the effluvium from which would give rise to asthma—cats and rabbits. Since that time I have met with cases in which the effluvium from horses, wild beasts, guinea-pigs, cattle, dogs, hares, would immediately give rise to a paroxysm. One patient, the proprietor of a well-known equestrian establishment, always had his asthma brought on by the presence of horses; consequently he was continually asthmatic. He had no suspicion of the real cause of his symptoms till he made his fortune, and retired from business, when he almost entirely lost them; but if at any time he goes back to his old haunts among the horses, his old trouble immediately shows itself. By giving up his avocation at any former time of his life he would have probably lost his disease.

One morning in last October an American gentleman called on me, and after introducing himself, explained that he had come to thank me for having cured his asthma. I expressed my pleasure at the result, but said that as I had never had the pleasure of seeing him before, I was not aware of the particular way in which I had achieved it. He then told me that one day when he was in the public library at Boston, he happened to take up my book, and turning over its pages, was very much interested by the account of a case, headed, "Cat-Asthma." He read it with a kind of amused incredulity, but on thinking more over the case, the idea suddenly came into his mind that the asthma in his own case might be due to an analogous, though not identical cause. I will give the history of his case in his own words, as he kindly furnished it to me afterwards in writing.

"Before reading your work I had been suffering for many years from asthma,—indeed I cannot remember the time when I did not wheeze,—and had been endeavouring, by a collation of the incidental circumstances attendant upon my sufferings, to discover the immediate cause of the attacks. There were certain places in which I was sure to be troubled with asthma as often as I visited them, but there seemed to be no common feature in them all that I could seize upon to explain the origin of my troubles. These places were always dwelling-houses, and at one time I had a suspicion that I was only affected in houses which had been freshly painted. But experience afterwards dispelled the illusion. Amongst other places I was unable to remain over night in the house of a friend who lived out of the city, in an elevated situation, and in a remarkably healthy locality. The first day on which I obtained your work, and had my attention drawn to the cases mentioned in it of persons being affected by the presence of some animals, and especially of cats, it immediately occurred to me that my friend invariably had one or two pet *dogs* about his premises, which enjoyed also the run of the house. I went at once to him, and related what I had read. He listened with incredulity, and invited me to test my suspicions immediately, saying that, as one of his dogs had died and the other had run away, he had had no dogs in his house for a fortnight. I accordingly passed the night there, and, to our mutual astonishment and delight, with not a trace of asthmatic symptoms.

"After this, every time I was attacked by asthma, I found that, though it could not be invariably laid to the presence of dogs, it never or but seldom occurred without the presence of some animal, the catalogue of those producing it extending by painful experience, until now I am not willing to say that I should not suffer by the presence within doors for any length of time of any quadruped as large as a cat. I am most readily and quickly affected by dogs, when I have been free from asthmatic trouble for weeks. I can generally detect their presence within fifteen minutes; and if I remain in the same room with them for three quarters of an hour or an hour of an evening it is pretty sure to prevent my night's rest; while a few seconds only is enough to disturb me quite materially if they are near me when I am but just recovering from an attack. Cats are almost quite as troublesome as dogs. Rabbits, which I believe are mentioned in your work, I have never been brought into contact with; but I cannot harness a horse, or sit behind one on the front seat of a vehicle for any considerable length of time, without experiencing some evil effects; and though I am not usually affected at all in the open air, I believe that a recent attack was wholly due to the close proximity, on board a small steamer in which I crossed the Irish Channel, of a flock of sheep. I have been troubled also in visiting menageries, though I do not think I am so soon disturbed in such places; and, as I have been quite differently affected there at different times, it may be that only certain classes of animals have the power of disturbing my nervous system.

"I generally have some precursory symptoms before any difficulty of breathing is experienced at the commencement of one of my attacks; these are particularly an itching and swelling of the eyelids, which increase on irritation to a considerable inflammation, accompanied by a lachrymal effusion.

"I discovered once, and experimented several times afterwards to prove it, that if my hand were brought to my eye after it had been passed over the hair of a dog or a cat in fondling them, precisely similar results followed; and I have even experienced the same effects on putting my hand to my eyes after I had passed it many times through my own hair. An application of water I have found an effectual and speedy alleviative.

"There are a multitude of instances I might cite to show that dogs and other animals are the cause of all my woes; but a few of the more striking ones will answer the purpose of a hundred.

"I was accustomed one winter to go frequently into the house of a relative living only a few doors from my own dwelling, and never experienced any asthmatic trouble there; no dogs or cats were kept in the house. Going in, however, to pass the evening on one occasion, when a friend had brought his dog there, I was immediately affected by it, and had a severe attack in consequence; yet I have never been troubled since in the same house.

"Going to spend a few days with a friend who was accustomed to have his dog run about the lower part of the house, I passed one or two nights in comfort by spending my evenings in the open air on the stoep; a third night, however, was passed in the utmost discomfort, from incessant and violent attacks. I had simply changed my chamber; but as there was no animal in the room, and I slept with my door closed and window open, I could not divine the cause. It was sufficiently explained afterwards, when I was told that a few nights before, the dog, which was generally turned out of doors at night, was found in one of the sleeping apartments, and turned out into the hall; and was discovered the next morning in this then unoccupied room, snugly ensconced in the blanket which I had afterwards been hugging to my throat.

"On another occasion I suffered from an attack of asthma because the outer garment of some persons who had been playing with dogs had been left for a few hours in the room in which I had passed the evening and night.

"One curious case occurred since I had the pleasure of seeing you in London. I had had an attack of asthma a day or two previous, from passing an evening at the house of a friend who had a pet dog, and was not fairly over it, or rather, while not actually suffering from shortness of breath, was in that state that a very slight cause is liable to produce considerable results. I was passing from one part of the city in an omnibus, but had scarcely taken my seat before I began to experience a tightness of the chest. I looked about for a dog, but could discover none, and came to the conclusion that it must be caused by the previous presence of one in the omnibus. I was on the point of getting up to pass out, when a lady opposite, arranging the folds of a cloak, disclosed the shaggy head of a pet terrier on her lap! I waited for no further development.

"The only other things which seem to affect me are, rapid walking or running in the wind on a very cold winter's day, the fumes of a brimstone match, and the dust of a large crowded audience hall when I have remained in it for some time. These affect me only in the mildest way, as a sort of wheezing, and are soon over.

"I am sure I have never had an attack of asthma at all severe since I read your work, now fully five years since, in which I could not trace it to animals as the probable and generally the indubitable source; and when I can remember the circumstances of previous attacks they all come under the same category, so that I do not know of a single case which I believe was due to any other cause. I find, therefore, that by regulating my movements in accordance with this knowledge I can avoid attacks of asthma altogether; and of late years I have never had an attack without having anticipated it, except in a few strange instances like the one mentioned where I slept beneath a blanket which had been previously appropriated by a dog; and I have never anticipated an attack without experiencing it, unless I have prevented it by my invaluable ally, tobacco, for which remedy, as well as for the knowledge of the original cause of my troubles, I am deeply indebted to you. The use of it is disagreeable to me, and scarcely less so now than when I first tried it; and I am easily affected by it, though perhaps not quite so much as I once was. I can fully corroborate all you say about it, and have heard of others who have used it with equal success.

"You will see by this that I have my complaint quite under my control; and I can say, comparing the last four or five years of my life with the previous, that, thanks to your book, though an asthmatic, I have not *suffered* from asthma."

I might mention many similar cases from my notes. In one the patient when a boy was never able to keep rabbits in consequence of the effluvium from their hutches always bringing on asthma when he went near them. In another, a lady was always unable to visit the Zoological Gardens without being rendered asthmatic, especially was she unable to go into the animal houses. In one case a great variety of animals, as in the American gentleman just related, had the power of giving rise to asthma—horses, rabbits, sheep, oxen, and dogs; this gentleman could never go to a horse-show or dog-show without becoming immediately asthmatic and being compelled to leave. Three of my patients belonged to a family in which this peculiarity existed for three generations, and was evidently hereditary. The grandfather was affected by cats, and could always find out by his breathing if there was one in the room. A grandson, who was also asthmatic, always had an attack brought on by the smell of guinea-pigs. A nephew could never go near horses without being rendered asthmatic, nor could he be in a room where those were who had been riding. He was a country gentleman and frequently anxious to attend agricultural meetings, but he was unable to do so from this circumstance. Another nephew told me a curious thing of himself, which, if correct, is perhaps more curious than any of the other facts. On two occasions, when staying at a friend's house in the country, he was attacked with asthma, and found in both instances that there were deer feeding at the time immediately beneath his window; on a third visit, when the deer had been removed to a distance from the house, he was quite free from any asthmatic symptoms.

One of these gentlemen told me of a friend of his, a country clergyman, who was always rendered asthmatic by the neighbourhood of a hare or hare-skin. If he met any of his parishioners on a Sunday who had been poaching and had their booty about them, he could always in this way detect them. When this gentleman was a boy, and studying with a private tutor, a friend put a hare under a sofa in a room where he was, as a practical joke; the result was an immediate and very severe attack of asthma.

NOTES ON A CASE OF OVARIOTOMY.

RECOVERY.

BY H. B. GOOLD, ESQ., M.R.C.S.

SARAH S——, aged thirty-four, the mother of three children, all living, the youngest child being one year and ten months old. About three months before her last confinement she suffered considerable pain in the lower part of the abdomen, which continued more or less until she was delivered. Soon after delivery she perceived her abdomen to be increasing in size. She consulted me for the first time in November, 1865, and on January 25th, 1866, I tapped her; she then measured forty-two inches round the abdomen at the umbilicus. I tapped her three times afterwards in different situations and at intervals, in order to empty the various cysts of which the tumour was composed. After the last tapping, the woman becoming very emaciated, ovariotomy was proposed to her. She consented; and on June 16th, 1866, the operation was proceeded with, in the presence of Messrs. Norman, Kealy, Pritchard, and Dr. Hardin, who administered the chloroform.

An incision having been made from the umbilicus to within an inch of the symphisis pubis, the tumour was found to be adherent to the anterior abdominal wall, together with portions of the omentum. These adhesions broke down readily before the hand, and at the posterior part the tumour was found to be tolerably free. The largest cyst of the tumour was then tapped and emptied of its contents, and the tumour drawn out through the incision in the abdomen. The pedicle, which was long and about the size of an adult finger, was secured by Spencer Wells' clamp, and the wound closed by three hare-lip pins carried deeply through the peritoneum and three intermediate superficial wire sutures, all of which were covered with a pad and flannel binder. The right ovary was found to be of normal size.

The tumour was not weighed, but it more than filled a large wash-hand basin, after having been partially emptied by the tapping. It was found to consist of innumerable cysts of various sizes, held together by a large amount of connective tissue. Some of the fluid contents resembled thin glue.

June 17th.—Morning: Patient looks cheerful; slept a little during the night, and has suffered but little pain. Pulse 84, soft; since the operation has taken six teaspoonfuls of brandy in cold water at intervals, and cold beef-tea; has passed no water, and feels no desire to do so. Evening: Has passed water twice; vomited green biliary matter. Ordered brandy and ice.

18th.—Looks cheerful; slept at intervals during the night; no sickness; pulse 100, soft and regular; tongue moist; has taken nothing but iced brandy-and-water; complains of pain

in left hip, extending to the foot; passes water freely. Ordered bread and milk.

19th.—Slept well; pulse 96; no vomiting; pain in the leg much better.

20th.—Doing well; pulse 90.

23rd.—Bowels relieved without medicine; pulse 80.

24th.—Removed superficial sutures from wound.

28th.—Been doing well since last report. Pins and sutures all removed. Patient fast gaining flesh.

30th.—Removed the clamp.

July 1st.—Patient was dressed, and sat up for two or three hours.

9th.—She is now able to attend to her usual household duties.

No opium or other narcotic was administered to this woman between the operation and her getting about.

Southsea, Sept. 1866.

NOTES ON CHOLERA AT COWES, ISLE OF WIGHT.

To the Editor of THE LANCET.

SIR,—I was not aware that the duty of reporting on the sanitary condition of Cowes in reference to cholera had devolved on your correspondents of last week. I find three of the cases so reported belong to myself, and are alluded to without the usual professional courtesy of acknowledgment. Such reports must necessarily be incomplete that do not emanate from the medical men who attend the patients reported on. The following cases I have personally attended, besides about fifty cases of diarrhœa more or less severe and choleraic in its tendency, without any fatal issue.

1. A French sailor from St. Malo, aged twenty-two, was attacked on board his ship; neglected seven days. When seen on board the vessel, he was lying in a deck-house, about six feet long, five wide, and four in height, nearly filled with sails, ropes, and lumber, and upon which four other men slept in company with this patient. Watery evacuations were unconsciously running from him, soaking everything beneath him; cramps in the stomach, arms, and legs; emaciated; choleraic voice and appearance. Ordered the ship to be chlorinated, decks washed, sails and lumber removed; mattress made up; no one to sleep with the affected person; and other instructions, which I saw carried out. Recovery.

No other case occurred in the ship, neither did the sailors who slept in the same place with him suffer.

2. A ship bound from Yarmouth to Bordeaux put in here with cholera on board, and was ordered to the Mother Bank for quarantine.

3. Neglected diarrhœa for seven or eight days. The patient had worked in water during this time, and had taken no medicine. When first seen he had great pain in the stomach, legs cramped, and fingers flexed on the palm; blue and cold; rice-water evacuations and vomiting. Treatment had only a temporary beneficial effect. He was seen also by Dr. Fowler, of Southampton. Died on the third day; aged fifty. Residence clean, and could be well ventilated.

4. Samuel M——, living in an imperfectly drained street. Rice-water evacuations, vomiting, choleraic aspect and voice, cramps in extremities, no pain in the stomach. Gradual improvement, evacuations becoming bilious. Relapsed twenty-four hours afterwards, all the bad symptoms returning in an aggravated manner: fever, rice-water stools more copious than before, vomiting that would not yield during a day and night. Sat down by his bedside and administered ten drops of camphorated chloroform every ten minutes on a lump of sugar. In three-quarters of an hour the sickness had ceased. He was carefully fed with very small and frequent quantities of good beef-tea, and afterwards with mock turtle soup. I was fortunate to discover in time some mutton-broth, sent him by a charitable clergyman, which contained when cold two-thirds grease, which might have imperilled his life. Patient made daily improvement, and was able to work in a fortnight. It may be well to remark that this man, whose age is about thirty, is a painter and subject to painter's colic. Declares at this date he was never so well in his life.

The next house to this was only separated by a single brick partition. Two fatal cases of cholera occurred—mother and daughter; not under my care.

5. Mrs. B——. Severe choleraic diarrhœa; recovery. In the same house as Samuel M—— above.

6. George N——, aged twenty-seven, living at East Cowes. Violent attack of diarrhœa and vomiting; cold extremities; no pain; evacuations becoming rapidly paler, but did not quite lose their bilious constituent. Recovery. Residence in a large house only partially inhabited.

7. Mr. P——, aged forty; occupation constantly out-door; residence apparently healthy, but near the bank of the river. Vomiting; watery evacuations, becoming rice-watery, but not quite losing their bilious constituent. Recovery.

8. William S——, aged twenty-five. No pain in the bowels; evacuations of the characteristic rice-water kind, copious and frequent; not so marked a choleraic appearance; extremities did not lose warmth; did not suffer from thirst. Residence an old, ill-built, imperfectly ventilated house, on lofty ground, and in a crowded neighbourhood. As the town is imperfectly supplied with water from reservoirs, little difference can arise from this cause.

9. Mrs. M——. Urgent symptoms occurred in the night—cramp in extremities and much pain and oppression in the stomach; continuous vomiting and purging for many hours. Tardy recovery. Lives in an almost new cottage, not crowded, on the loftiest spot near the town.

10. E. F——, a child under two years. Watery stools, constantly running away; continuous vomiting for four days. Died. Residence on high ground, neat, clean, well furnished. Irregular supply of water, none sometimes for several days; not supplied from the usual source.

Many other cases similar to these have occurred, and have lately sprung up in distant and unlikely localities, perfectly unconnected with each other or any contagious influence that can be traced, although the true forms of cholera seem to have subsided, the most unhealthy and depraved positions and persons escaping in a surprising manner. Nevertheless, the disease is no doubt the offspring of filth, overcrowding, bad ventilation, imperfect drainage, bad water, intemperance, poverty, and the too prevailing practice of the adulteration of almost every article of diet and drink. We cry out loudly about the impurity and contamination of water and air, and very properly so; but we forget that almost everything we eat or drink may contain some ingredient injurious to health and favourable to the propagation and continuance of disease. The Government seem to have overlooked the necessity of prompt legislation on the adulteration of the food and drink of the people—quite as essential as any other measure having for its object the sanitary improvement and health of the population. The drainage of this town, although so manageable, is exceedingly defective, every abomination running, and spreading itself out with the most extended surface, upon the shore, the liberated noxious gases and poisonous effluvia from which are blown back again into the people's dwellings. No quiet hints or friendly admonitions are sufficient to urge the Board of Health to improvement. It has been frequently suggested that the whole of the town sewage should be intercepted by a suitable and capacious sewer around the shore, there to be carried to some convenient part of the River Medina, perhaps, or out to sea, to be disinfected, and thrown out at proper states of the tide. Some such comprehensive system should be at once considered and carried forward with as much promptitude as funds will permit. The present condition is opposed to common sense, science, and civilization, and is highly animadverted upon by the wealthy, intelligent, and aristocratic visitors who so essentially support the prosperity of the town of Cowes.

Birmingham Hall, Cowes, Sept. 12th, 1866.

Yours truly,
J. H. JEANS, L.R.C.P.

FLANNEL BELTS IN THE FRENCH ARMY.—The Secretary at War has just issued orders for such belts to be supplied to the whole of the French army. They are to be worn on the skin, and are expected to protect and keep warm the abdominal and lumbar regions.

STRANGE DEATH OF AN ACCOUCHEUR.—Dr. Berguesse, well known and much esteemed at Havre, was called to a protracted labour, and whilst using the forceps he suddenly fainted and called for help. He was hastily removed to an adjoining room, where in a very short time he expired. Medical men were quickly summoned and undertook the unfinished operation, whilst every effort was made to revive Dr. Berguesse, though unfortunately without avail. The child brought away by the forceps was, however, dead; and the fact of the doctor having died in so sudden a manner was, for obvious reasons, concealed from the mother, who made a good recovery.

THE LANCET.

LONDON: SATURDAY, OCTOBER 6, 1866.

THE Introductory Addresses at the several Medical Schools, of which we give a *résumé* this week, will without doubt admirably serve their intended purpose of introducing the work of the Session, and of stimulating the student to apply himself with energy to the labours before him. If there be no great novelty in the productions of this year, they are at least, for the most part, sensible discourses addressed to the young men for whom they are specially intended, and not, as has sometimes been the case, addressed over the heads of the real audience to the public at large. We are glad to find so many echoes of our "Address to Students" in the enforcement of the paramount necessity for clinical study, and in variations upon the one grand theme, "Labor omnia vincit."

Some peculiarities may be noticed in different lectures: thus, whilst most indulge in grave and solemn discourse, others, and notably Mr. BARWELL at Charing-cross, relieve their more ponderous matter by a certain amount of facetiousness. Others, again, are loud in the praises of the institution with which they are connected—and this, perhaps, is pardonable on an occasion when the enlistment of pupils is one of the primary objects of the lecturer,—and amongst these we may instance Dr. HEAD at the London, and Mr. HAYNES WALTON at St. Mary's Hospital. Sir WILLIAM FERGUSSON, whose address we give *in extenso*, spoke with that kindliness of heart and regard for the welfare of his pupils which have always distinguished him, and which by anticipation brought together a large number of old pupils and friends to hear him. At Westminster, St. George's, and St. Thomas's, Dr. FINCHAM, Dr. OGLE, and Dr. BARKER gave plain-worded and yet deeply thoughtful addresses, admirably suited to the occasion on which they were delivered; and the same may be said of those by Dr. RINGER at University College, and Mr. HULKE at the Middlesex Hospital. As we propose to give Mr. SAVORY'S address at St. Bartholomew's in our next issue, we shall not here refer further to his able discourse, which our readers will be able to study in its entirety.

The discourse at Guy's Hospital stands apart from the other addresses of the year from the fact that it was delivered by a layman, the distinguished President of the hospital, Sir LAURENCE PEEL. Guy's Hospital set the example of non-medical introductory addresses in 1858, when Mr. TURNER, the Treasurer of the hospital, delivered an eloquent and interesting lecture; and the medical staff may be congratulated on the equally thoughtful and instructive one which has inaugurated the labours of the session this year. We are so accustomed to look at medical matters solely from a medical point of view, that it is refreshing to hear how the *ars medicinæ* is regarded by those who are outside the profession, and notably so by such a distinguished judge as Sir LAURENCE PEEL. His views have all the greater interest from their evident spontaneity. As he said himself, "he had not crammed for his address, nor stuffed himself out for his part with a portly paunch of learning. Sudden ingesta were not learning." Would that we could impress this latter sentiment upon the profession, more particularly its younger members! We should have probably fewer writers, but many more valuable books; less apparent activity, but vastly greater exercise of intellect. "Ora et labora" may be taken as the text of Sir LAURENCE PEEL'S address; for whilst showing the student how by honest labour alone he can fulfil his duties in this life, he is careful to direct his attention to that future state for which his labours here are but the preparation. It is gratifying to find a man of Sir LAURENCE'S stamp defending science generally, and the art of medicine in particular, from the aspersions of those ignorant zealots who would condemn everything not answering to their own shibboleth. "Ubi tres medici ibi duo athei" has long lost its sting for the medical profession, though men of science are now coming under the same imputation amongst narrow-minded and bigoted sectarians. "Religion and science could never clash. Collision implied blunder; while science was essentially a progressive thing, and religion was essentially a progressive thing." We trust that these words may catch the eye of those who, like some of the good people north of the Tweed, are doubting whether they shall lend a helping hand to science in the person of the British Association, for fear of assisting in the dissemination of atheistic and revolutionary doctrines. The passages referring to the tendency of the public to strive after occult and mysterious remedies, and to reject as too simple that which they could understand for themselves, were very happy. To "proscribe what was and to prescribe what was not at hand" was a rule which has brought reputation and wealth to many a doctor of the old school; but we trust the extra-professional world is learning wisdom equally with ourselves, and that not only are we abandoning, but the public also is ceasing to expect, the wonderful nostrums which formerly were recommended by men of position, but which are now the property solely of advertising quacks. The lecturer perhaps was hardly aware how well his quotation "De grand simple" applied to some of the teachers seated around him, since the notion of following out the natural course of a disease with a great, if not an entire, dependence upon the "curative powers of Nature" has been put in practice by them to an extent which has provoked a great deal of criticism.

The winter session has thus been inaugurated; and let us hope that all the good advice which has been given will fall into fruitful soil and bear abundant fruit of good work. All the students have been exhorted to exertion, but it seems to be taken for granted that the teachers require no similar reminder. Perhaps it might be invidious, and certainly it would be impolitic, were a lecturer to hint at any shortcomings on the part of his colleagues; but the fact remains that all teachers are not equally zealous in carrying out those duties which have been described in the inaugural addresses in such glowing terms. Regularity and punctuality are no less essential for the teacher than the pupil, and the non-observance of them by the former entails a vast amount of inconvenience and actual loss upon the latter. It would be curious to hear an address at the *close* of a session, delivered by an acute and intelligent student, setting forth his experiences and the opinions he had formed of his several teachers. We fear the revelation would be occasionally of a somewhat sensational character.

The duties of a teacher are most responsible, and no private feeling should be allowed to have weight in maintaining as teachers those who are not suited to the work. The entry of a pupil at a medical school is as solemn a contract as a deed of apprenticeship of a youth to a firm in business, who are bound to instruct him in his work, and to see that he thoroughly masters his calling. Every introductory lecturer lays stress upon clinical teaching; but good clinical teachers of either medicine or surgery are not superabundant in London. More than one lecturer has referred this year to the improved intelligence and greater cultivation of the student of the present as compared with former times. Let us hope that the teachers will, if they have not already done so, make equal advances, for unless they do, their highly intelligent pupils may make them feel very uncomfortable.

WE sometimes reproach ourselves for not sufficiently appreciating the dental specialty. We are known to have no great affection for specialties as such, and to look with disfavour upon the tendency to multiply which they have shown of late years. But there are conspicuously two specialties, the reasonableness of which we all recognise both in theory and in action. The one is the ophthalmic, the other the dental, specialty. Part of the explanation of the fact that the profession has not felt more warmly and fraternally to practitioners of the dental specialty may be found in this, that some of the lowest parts of the art of dentistry have been practised by uneducated and unprofessional men, whose only idea in connexion with a bad tooth was to extract it out of the patient's mouth, and a shilling out of the patient's pocket. This was really the sum of the dental art at a time not very remote. It is not surprising, therefore, that it did not to any extent excite the interest or command the respect of the profession.

Dentistry now, however, is a very different thing. The art itself has become conservative, and the men who practise it include fellows of the Royal Society, fellows of the College of Surgeons, and a certain number of well-educated surgeons. Most of us know that dentistry has passed into higher hands from our personal experience of the skill and culture of those who practise it. We do not mean to flatter our brethren of the dental department, nor to imply that we think it a high pleasure to submit to their peculiar operations; but, having respect to the sensitiveness of the organs upon which they operate, and the variety of manipulations required, we must admit that their operations are amongst the nicest and most difficult of minor surgery, and frequently call for the higher qualities of the surgeon. The mingled strength and delicacy with which a dentist manipulates on the very borders of the pulp cavity we must allow to be a very fine illustration of skilled handiness, to say nothing of the detailed demands upon the faculty of judgment made by the various diseased states of teeth.

But if any of our readers are blessed with such good teeth as not to be able to endorse these opinions from their own experience, and yet would like to study the present condition of dentistry as a most useful art with a scientific basis, we should refer them to the "Transactions of the Odontological Society for 1863—65," a volume containing various scientific papers, very well illustrated, and affording ample proof that the most common diseased states of the teeth are being studied in the light of advanced physiology, as well as with a practical eye to the relief of suffering.

It is perhaps only reasonable to expect much from a scientific dentistry. The objects of its study are within easy reach. They can be seen, and all the surrounding conditions can be minutely studied. They are so precious in point of usefulness and appearance that a wealthy community will not spare money to reward the art which saves them. Then their diseases are amongst the commonest things in life. Next to a cold in the head, perhaps the commonest evil that "flesh is heir to" is caries of the teeth. And yet this common disease, which we see every day, is one of the unsolved problems of dental science. It is an actual fact, that dentists, as yet, give us only a very various and discrepant account of the causes of the decay of the teeth. We know that there are national conditions favourable to the preservation of the teeth, and we fear we must add that our own national conditions are not very favourable to this end. The North American Indians have good teeth. So have the Negroes. A surgeon in one of the ships on the FRANKLIN expedition to the Arctic regions informed Mr. BATE that he never saw a decayed tooth amongst the Esquimaux, although he made his observations on both living and dead subjects. Dr. PANUM some years ago reported to the Danish Government on the health of the inhabitants of the Faroe Islands. One remarkable feature of it was the absence of tubercular disease of the lungs; but amongst other observations of Dr. PANUM we remember this, that it was common to meet persons of the age of seventy who had not lost a tooth. So that we have great national contributions to the solution of this pathological problem—the prevention of dental caries. Yet we cannot say that any accuracy of conclusion on the subject has as yet been realised. Whether the first steps in the process are strictly chemical, or rather vital; whether it is a process primarily of mere absorption, or of solution; and if of solution, then whether the solvent is one generated within the tooth or external to it,—these are questions to which Odontology gives only an uncertain answer. In this uncertainty we have another illustration of the fact that our knowledge of the commonest vital processes, and of departures from them, is in its very infancy. This is to be said, however, for good odontology, that it is eagerly prying into this mystery, and that some of our leading operative dentists are foremost in the knowledge of the minute structure of healthy teeth and of the agents by which this structure is impaired. The very volume to which we have referred contains an able paper on the Pathology of Dental Caries, by C. SPENCE BATE, Esq., F.R.S. Mr. BATE'S theory of decay is, that it is in the first instance a vital process having its origin in a low vital condition of the animal tissues of the teeth, especially of the cementum; that there is but a short step between this low vitality of the animal tissue and its decomposition; that when this decomposition happens, carbonic acid is generated in immediate contact with the salts of the tooth, which it dissolves. "The removal of each atom of phosphate of lime in its turn exposes more of the animal tissue of the enamel to decomposition, and an increased chemical action is superinduced." Mr. BATE'S theory of decay is opposed to the more common one, which attributes the action on the teeth to an external acid, such as lactic, existing in the secretions of the mouth. He develops with much ingenuity, though occasionally with a want of clearness, the arguments in favour of carbonic acid generated *within* the tooth being the active agent of solution. The abnormal constitutional states

favourable to decay of the teeth are those in which there is a defective removal of carbonic acid from the system. These are, according to MM. HARRIER and ST. LEGER, phthisis, variola, measles, erysipelas, roseola, scarlatina, erythema, dysentery, chronic diarrhœa, and typhoid fever, as well as the state which exists during the suppurative process.

Our respect for the dental department of medicine will be increased when it shall once determine the causes of caries, so as either to remove or to arrest them. Already they are partly controlled by mechanical processes which apparently retard decay. This power over the process of decay is so much believed in now that extraction of teeth in the best practice bears only a small proportion to the operation of stopping or filling. By the way, if this be the case, it makes rather in favour of the theory that would attribute caries to the operation of agents external to the tooth itself. There is undoubtedly, however, deep truth in the view that regards the vital condition of the animal tissues of the teeth. It is not a little curious that organs so largely earthy and inorganic in their composition should be amongst the first to show signs of degeneration. We should take caries for a sign. It may be that if we can control it, and materially promote the longevity of the teeth, we shall in that effort learn to promote the longevity of the whole system. The onus of doing this great service is to that extent on the labourers in the odontological department of the profession, whom we cordially recognise as worthy labourers in the domain of our art.

Medical Annotations.

"Ne quid nimis."

REGISTRATION OF MEDICAL STUDENTS.

THE registration nuisance continues unabated. Students are again this year compelled to register three times and in three different places the same series of facts. They must inscribe their names, school, attendance on lectures, and preliminary examination, at the office of the Medical Council, at the College of Surgeons, Lincoln's-inn-fields, and at the Apothecaries' Hall. We are not disposed to attempt to individualise the culprits; and we have not the least doubt that excellent reasons can be found for this fussy piece of bungling, as well as for every other arrangement which corporations make. But it will be difficult to show that there is any real necessity for such thrice-repeated labours. Each corporation separately has its own reasons. The Medical Council must have a register to satisfy itself that the pupils who now enter the medical schools do so under the conditions prescribed by their regulations. The College of Surgeons has always leaned to the view that it is, by some natural ordination of iatric providence, a supreme power in the medical sphere, and it assumes with calmness the right to be an *imperium in imperio*. The reiterated practical enforcement of such a principle is in itself an element of power. The College registration is very excellently performed; and, sooth to say, it is, we believe, a more complete and reliable registration than that of the Council—at least that opinion is very strongly held in Lincoln's-inn-fields. One reason for this probably is that the staff of clerks at the Medical Council office are overworked and underpaid. The very scanty allowance to the clerks for doing all the work involved in the registration of practitioners, the registration of students, the sale of the Pharmacopœia, the preparation of the Minutes, and the conduct of the general business, contrasts very strongly with the very liberal allowance to the registrar, who is a highly ornamental but by no means equally useful official. The registration of the Medical Council is at this moment a form; it is a worthless farce. In the first place because the College of Surgeons utterly ignores it, and admits or refuses to admit to examination all exceptional cases on its own responsibility: putting on the register persons whom the Medical Council rejects, and by no means referring to it the cases of persons claiming registration on grounds not yet admitted by the Council. The Medical Council's Register professes to be a list of all the students in Great Britain; but it is not. And this is so well known that we believe the College of Physicians has lately sent to the College of Surgeons for copies of certificates of registration instead of to the Medical Council. It is not, perhaps, our part to analyse all the causes of this failure: one is certainly the contumacy of the College of Surgeons, which continues to exercise on its own behalf a function which properly belongs to the Medical Council, and ought for the sake of the general convenience to be entrusted to it and carefully performed by its officers. Another is the inability of the Council, in the face of this contumacy of the College of Surgeons in admitting, without reference to the Council, those who are beyond the boundary line, to maintain a complete list. The Council is compelled, however, to accept for final registration as practitioners all to whom the College of Surgeons gives its diploma. The Council's list of students is, therefore, now a mere form. Of two things one: either it should not require the attendance of students at all, or, if it does so, it should show how the attendance is to serve them. More reality or less semblance of power is desirable.

CHOLERA INSTRUCTIONS IN GLASGOW.

A MORE complete set of instructions for cholera purposes than those issued by the Sanitary Department of Glasgow we have not seen. They consist of six papers. As they would be really worthy of imitation in other towns, we append the headings of the several papers. 1. Instructions for District Visitors in time of Cholera, or when Cholera is threatened. 2. Instructions for Medical House-to-house Visitors in Districts in which Cholera prevails or threatens to prevail. 3. Instructions on Disinfection for Medical Officers, District Visitors, and others in cases of Cholera, Choleraic Diarrhœa, and other diseases of like character. 4. Instructions for the Inspector of Cleansing as to Disinfection in Cholera and Diarrhœa. 5. Instructions for Chemists and Druggists, and for all persons charged with the supply of Disinfectants. 6. Plain Directions for the People.

The Instructions for Disinfection are very good, as are also the Plain Directions for the People. It will be some set-off against the injury inflicted by this epidemic that the people are being instructed to an unprecedented extent as to the nature and use of the means at our disposal for preserving health and destroying the contagious principle of cholera and other epidemics.

Glasgow has a bad sanitary character. But she promises to show how in a great city there can be much care for the life with which it teems—a demonstration greatly needed. With the advantages of a good water-supply, and the wise counsel of her present sanitary advisers, we hope Glasgow may escape any very severe visitation of cholera.

THE MEDICAL CLUB.

A MEETING of the promoters of this Club was held at the house of Mr. Propert, on Tuesday last. A letter was read from Sir Wm. Fergusson, expressing his pleasure to preside at a general meeting to be held at the Hanover-square Rooms on Thursday, Nov. 8th, at two P.M., to aid in the establishment of the Club. A code of rules was agreed upon to be submitted to the general meeting; and considerable discussion ensued as to the permanent title of the Club. It was ultimately agreed

to retain the title of "Medical Club" until the ensuing meeting, at which it would be decided, if agreeable to the family, to suggest as the permanent title "The Brodie." As the rules propose to admit members of scientific societies, and as the late Sir Benjamin Brodie presided over the most distinguished scientific assembly in this country—the Royal Society, and occupied the highest position it was in the power of his profession or the State to confer, it was thought that to name the Club after so eminent an individual would reflect the greatest honour upon the Society, whilst it would hand down to posterity the name of one who was held in universal estimation.

One hundred and fifty gentlemen have already enrolled themselves members of the Club; and we are happy to learn that it is steadily and satisfactorily progressing. All must desire to see established an institution calculated to draw us together in one common brotherhood, and to present us to the public as a united body.

ENGLISH SCHOOLS THROUGH FOREIGN SPECTACLES.

A VERY intelligent physician of Brussels, Dr. W. Rommelaere, spent some months recently in London, studying in our hospitals and examining the method of organisation and instruction in our schools and hospital wards. He has published a very careful and correct account of them, from which we may profitably extract a few remarks.

After having visited the various continental schools, Dr. Rommelaere is naturally impressed disagreeably with the costliness of anatomical subjects, and this, added to the grave inconvenience of scarcity of subjects, explains how it is that anatomical dissection is less fully and completely pursued in London than in Belgium and elsewhere on the continent. The teaching of histology has, he finds, in England an eminently practical character. Teachers do not confine themselves to the description of the characters presented by the tissues; they make them visible. English physicians employ the microscope much. "Strange to say, in England little attention is given to purely theoretical researches, analogous to those which are pursued with so much ardour in Germany; nevertheless, the use of the microscope is general in clinical study." The theoretical teaching of pathological anatomy in London, leaves, he thinks, much to be desired; this deficiency is supplied by the great importance attached to the post-mortem examinations. On the organisation of the clinical system he is much struck by the fact that the visits of the surgeons and physicians, except during the "admission week," are only made twice or three times a week. He recognises, however, the utility of the appointment of house-surgeon, with a senior resident, in supplying this defect. The identity of language of the professor and patient (which does not exist at Ghent) is inconvenient for printing the truly clinical remarks made at the bedside. On the other hand, the system of "clinical clerkships" is, to Dr. Rommelaere, an interesting and valuable novelty. Clinical teaching, he says, finds an extremely important supplement in the preparation of the histories of the patients by the pupils. Nothing forms the practical capacity of the students better than the moments passed alone at the bedside of the patient. They learn there to see and to judge for themselves; they become used to interrogate the patients and to examine them. They lose the habit of wandering into the maze of secondary and unimportant symptoms; they acquire, in a word, the medical *sang froid*. It is vain to try: teaching can never be complete unless the lessons of the master are followed by examinations carried out personally by the pupils. Here lies, in the opinion of Dr. Rommelaere, the principal merit of the English, as of the Viennese, clinical teaching.

We are happy to cite this testimony, and desire to lay stress upon it at this moment, when a new generation of students commence their training in our schools. We have repeatedly urged the value of this method of using the opportunities afforded by the wards of our hospitals. A good clinical clerk and a careful dresser can hardly fail to become a sound and creditable practitioner. Dr. Rommelaere seems to suppose that the surgical students are often content to visit the operating theatre on the weekly field-day, and limit their practical surgical studies chiefly to that attendance. We by no means believe this to be so; if it is true of any school whatever, such a practice is certainly most injurious to the students, and its toleration is not creditable to the managers of the clinical department, who should be as strict, at least, in requiring attendance at the bedside as in the lecture-room. The museums of London Dr. Rommelaere finds to be very well arranged, and the post-mortem records kept usually with an accuracy which is admirable, and so registered as to admit of easy reference. On the whole, Dr. Rommelaere's observations are very favourable to our system of education. He hits on one or two blots, but he refrains from criticising others which we ourselves could point out to him. Such are the excessive application of the professorial system; the waste of teaching power involved in the multiplication of schools, and the consequent deficiency of means of illustrating theoretical subjects; the insufficient remuneration of scientific courses, compelling the ablest professors to eke out their income by supplemental means; and the want of laboratories for the higher class of physiological investigations.

ARSENICAL ABSORPTION.

MR. CHAMBERLAIN, a "herbalist," who has resided at Hertford for the last forty years, was committed for trial on Saturday last for manslaughter, after a lengthened inquest held before Mr. Day at the "Greyhound" Hotel, Albury. The evidence adduced showed that the deceased was the daughter of a labourer, was thirty-two years old, and had been suffering for twelve years from a tumour in the right shoulder-blade. She had consulted several medical gentlemen as to her complaint, and had been under treatment for eighteen months at the West Herts Infirmary; but failing to obtain relief, she was advised by her friends, as an alternative, to see Mr. Chamberlain. She accordingly went, accompanied by a friend named Emma Knowles, in March last, to the shop of Mr. Chamberlain, and showed that gentleman the tumour in her shoulder. He told her it was a "cancer-tumour," and that he thought he could "cure it." Having been successful in previous cases, he, without hesitation, prescribed for the deceased, and although, in handing her an ointment to be applied to the tumour, he cautioned her to use but "very little at a time," and to rub it "just on the top of the tumour," he omitted to label the box to that effect. Instead, however, of adhering to the verbal instruction, it appeared that the deceased applied the ointment herself twice or three times a day for a fortnight, when she became very ill, showing all the symptoms of having been poisoned. In consequence of this, Mr. Pope, a surgeon of Tring, was sent for. He prescribed for the deceased, after which she greatly improved, but subsequently relapsed and died in a fit in August last. A post-mortem examination of the body was made, and the heart, liver, and intestines were analysed by Professor Taylor. The evidence of Mr. Pope was to the effect that the symptoms were those of poisoning by arsenic, and he very properly refused to give a certificate without a coroner's inquest being held. Dr. Taylor stated that the tumour was an encysted one, and that there were traces of arsenic in it; that the stomach was reddened and streaked, and contained arsenic, as did also the liver. He also said that the brown ointment which the deceased had applied to the tumour contained arsenic; and was of opinion, taking into consideration this fact, with the symptoms and appearances described by Mr. Pope and Mr. Whateley, that arsenic had been absorbed into the system, and was the immediate cause of death. Mr. Chamberlain was admitted to bail.

VILLAGE HOSPITALS.

THE system of Village Hospitals, which we warmly hailed from the first as an excellent boon both to the public and the profession, has now satisfactorily passed through all the various phases of inception, trial, and repeated achievement. Village hospitals have been founded on the model of that at Cranley in several other districts in the country, and their success has usually been very satisfactory. Where it has not been complete, the partial failure has arisen, in the opinion of Mr. Albert Napper, the founder of the Cranley Hospital, from the area of the district being too much restricted, or from an attempt to carry it out on too large a scale. In other words, from trying to found an hospital where it was not wanted; or from enlarging the scheme to proportions which gratify ambition, but which exceed the needs of the neighbourhood, or involve an area of population so large that the main principles of the village hospital are violated. These principles are: the vicinity of the hospital to the home; its domestic arrangements; the restriction of the number of patients; and the removal therefrom of all the main causes of hospital disease which affect unfavourably the result of surgical operations where masses of wounded men or many cases of surgical operations are collected together. At the village hospital the patient is under the eye of his own usual attendant, who may, if he please, attend in consultation, or may himself operate and take charge of the case. Every patient is expected to pay a small sum towards his own maintenance—five shillings a week. This amounts to about one-third the total cost of the hospital. Such cases only are admitted as cannot be efficiently treated at the patients' own homes; whilst infectious, consumptive, and incurable diseases are excluded. One bed to each thousand of the population is found to afford a sufficient accommodation under these circumstances. The organization of the hospital is simple, and this is a great element in its success. One nurse, with occasional help, suffices for the duties. Directly a larger staff is attempted, administrative expenses multiply and difficulties increase. This has been a stumbling-block to some institutions. At the Cranley Hospital 100 patients were treated during the first four years. Of these, 77 were parish paupers; 7 were persons totally without means of paying; and the remaining 16 were all in humble circumstances. Of the 77 paupers, 10 were cases of accident and operation, for which the Board of Guardians paid the usual extra fees, amounting to £36. The expenditure for the year 1863, including furniture, repairs, and insurance, was £140. The receipts from patients that year were £35 12*s.*; from subscriptions and donations, £113. The expenditure during four years on 100 patients amounted to £612, and the receipts to £673, of which £542 was by donations, and £131 by receipts from patients. The total cost of fitting up an hospital for six beds Mr. Napper estimates at £70. Any suitable farmhouse may be taken as an hospital; or a building may, of course, be specially constructed with advantage. The benefits which such an institution confers are incalculable, and we recommend Mr. Napper's useful little pamphlet on Village Hospitals to all practitioners who may see the want of such an institution in their own neighbourhood. It is published by Lewis, Gower-street, London.

BAD WATER AND BAD SMELLS.

IN the third report of "THE LANCET Sanitary Commission on the Epidemic of Cholera in the East-end of London," it was stated that the cholera deaths had shown no tendency to localisation about the canals of the district, although these canals were at the time of the outbreak in a most filthy condition. This fact is a very important one in the history of the epidemic, and one not in accordance with a largely received opinion on the matter.

Now Mr. Orton, the medical officer for Limehouse, in his report on the cholera mortality in his district, noticed in last week's LANCET, expresses his belief that "the local nuisances have had their part quite as well as the water in the production of cholera," and states, in support of his belief, that it is a fact that within 200 yards of the Lea Cut and Regent's Canal 200 deaths have occurred from cholera and diarrhœa since the onset in July.

It is easy to show that it is an error to suppose, as Mr. Orton does, that this fact which he adduces favours his belief respecting the effects of the local nuisances, inasmuch as it is one in actual opposition to such a belief. According to the Registrar-General's returns, 3865 deaths from cholera and diarrhœa have occurred in the districts supplied with water from Old Ford—namely, Whitechapel, Mile-end Old Town, Stepney, St. George-in-the-East, Bethnal-green, and Poplar, and, therefore, over an area of 5584 acres. Unless we estimate them incorrectly, the lengths of the canals in these districts are about these:—Lea Cut, 2700 yards; Regent's Canal, from Thames to southern corner of Victoria-park, 3200 yards; Regent's Canal, along the south-west of Victoria-park till it leaves Bethnal-green district, and Sir George Duckett's Canal (a branch of the Regent's), along the south-east of the Park, together, 2500 yards. These give an area of ground, within 200 yards of them (exclusive of that in Victoria-park), of about 384 acres. Now, since 3865 deaths occurred over 5584 acres, 266 deaths occurred on an average over 384 acres. So that if, according to Mr. Orton, only 200 occurred in the 384 acres about the Lea Cut and Regent's Canal, *the cholera mortality within* 200 *yards of these canals was only three-fourths of the average.* This conclusion is probably not materially incorrect, but it is not here intended to assert its accuracy; all that is intended by it is to show that Mr. Orton's belief on a very important subject is not supported by his fact. In the third report of our Commission on the East of London epidemic, the matter was treated in some detail on positive grounds.

M. VELPEAU AND M. JULES GUÉRIN.

BOTH these surgeons are members of the Academy of Medicine of Paris; the former, however, as everyone knows, is professor at the Faculty, whilst the latter is unconnected with official teaching. For the last thirty years a somewhat bitter warfare has occasionally been carried on between these two eminent men; and one of the fiercest disputes is going on at the present time before the Academy.

M. Jules Guérin maintains, both in his speeches and in the *Gazette Médicale de Paris*, of which he is the able editor, that he is the *inventor* of subcutaneous surgery; and M. Velpeau, though allowing his opponent some share in the merit of having extensively applied subcutaneous sections, refuses, year after year, to admit the claim. It so happens that both belligerents are gifted with great elocutionary powers, that both are extensively read, and that both are wonderfully persevering and unyielding.

Those interested in subcutaneous surgery will find a mass of valuable information in the speeches recently delivered; and will perhaps remain convinced that, in the face of Stromeyer's and Schönbein's labours, the claim of *discovery* can hardly be defended. They will, at the same time, allow that great credit is due to M. Guérin for his valuable orthopædic labours. Not the least of the results obtained by the latter surgeon is the healing of large wounds by first intention through pneumatic occlusion.

At the bottom of the debate lies the fact that M. Velpeau represents the scholastic interest, the pride of the faculty and the professional dignity, against the really talented doings of an independent surgeon, unconnected with official position. The late M. Amussat, whose name is well known in the surgical world, succeeded, like M. Guérin, in becoming an eminent operator without attaining hospital or university distinctions.

These cases, however, are rare; for it requires an unusual amount of skill, perseverance, and surgical tact, to triumph over the difficulties besetting private practice. M. Guérin is a specialist: he has done good service in his orthopædic establishment. Like Behrend of Berlin, too, he is not slow in publishing his success, and is ever ready to fight hard battles in order to uphold his well-earned reputation.

GUARDIANS AGAIN!

THE medical officers of the Poor-law districts generally should know that the guardians of some London workhouses have so interpreted the recent recommendation of the Poor-law Board, based upon measures recommended for the improvement of the medical organisation, as to threaten the independence, the security, and the interests of their office. The life appointment of workhouse medical officers has always been recognised as the great safeguard of the sick poor. Appointed for life, and removable only for misconduct, neglect, or disability, the medical officers have to some extent been the independent friends of the sick, and their defence against grinding economy and neglect. The Poor-law Board have recommended, in accordance with our advice given on several occasions, and echoed by the heads of the profession, that when the infirmaries are large, house-surgeons should be appointed. Guardians of the East London Union have jumped at this proposal, in the idea that they might thus dispose of their out-door officer, and obtain a slave, whose muteness could be secured. They have positively moved that the resident office should be offered to the existing officer, and that in case of his declining so to alter all the existing conditions of the appointment, his office should be declared vacant. The motion was not carried at the Strand. At the East London the question is pending. The absolute injustice of this unheard-of course may not deter a Board of Guardians, but its default in equity and law will no doubt prevent the Poor-law Board from sanctioning such a proposition if it should come directly before them.

A MODEL SANITARY VILLAGE.

THE leading journal of Conservatism in Scotland—the *Edinburgh Evening Courant*—suggests in an able leader the institution of a "Model Sanitary Village." We think with our contemporary that the laws of health are quite well enough understood for such an enterprise, and that the Government—itself a considerable employer of labour — might make the experiment. The dockyard artisans, for instance, are "the labourers for whom, with the utmost advantage to themselves, and with the slightest possible prospect of loss to itself, the Government might construct one or more model villages," where the practical conclusions of sanitary science might be effectively carried out. In such a village, with the advantages of a healthy site, a temperate exposure, commodious house-room, a pure and abundant water-supply, with the dietary and the apportionment of labour and exercise under skilled and constant medical surveillance, the privilege of residence should be given as a reward to the well-behaved and industrious, who, of themselves, by their careful mode of life, would co-operate with the medical superintendents in carrying out the prescribed arrangements. The proposal is respectfully submitted to the enlightened judgment of Sir John Pakington. Our Conservative Ministry ought to be grateful to their trenchant northern journal for a suggestion, of which the practical fulfilment must inevitably redound to the philanthropic credit of any administration.

YELLOW FEVER AT ST. THOMAS'S.

WE learn by the arrival of the Royal Mail Company's steamer, *Seine*, from St. Thomas's, that yellow fever in its worst form has again broken out in the island, and terribly amongst the shipping. This steamer had six cases on board: two were sent to hospital at the island, which terminated fatally in a few hours; four occurred shortly after her departure, and arrived at Southampton on the 27th of September in a perfect state of convalescence. From all we hear, we think it not improbable that Southampton may possibly be the port through which this serious malady may be introduced into this country in the course of another fortnight or more, unless measures of the most stringent character be taken by the Privy Council.

TREATMENT OF LUNATICS.

IT is strange that the frequent occurrence of such cases as that which prompted an application to the magistrate at Marylebone Police-court last week should be regarded with so much apathy. Cruelty and neglect are hard additions to a terrible malady. Lunatics often require protection from their own friends, who, through ignorance or desire for concealment, or worse motives, aggravate the disease of the sufferer and preclude all chances of cure. It should be understood that the agents in such treatment as that sustained by the poor patient found in Dorchester-place are liable to legal penalties, and we have reason to believe that the Commissioners in Lunacy have the case under their consideration, and will act in this, and in similar instances, as their duty requires.

THE INTERNATIONAL SANITARY CONGRESS.

THE protracted labours of the International Sanitary Congress are drawing to a close. If their result, as set forth in the different reports of the proceedings of the Congress recently published, is not altogether so satisfactory as might have been anticipated from so imposing a body, this is to be attributed largely to the cumbrousness of its constitution and the impracticable nature of the subject with which it had to deal. It must be granted that the various members of the organization, as a rule, worked energetically to give their deliberations a good end, but the transcendental philanthropy which devised the Congress has thrown a glamour over its principal deductions, which, however much suited to the atmosphere of the East, is offensive to the practicality which should especially characterise the West. The difficulties which beset the measures that the Congress suggests for the protection of Europe from new invasions of cholera are so studiously smoothed down as to remove them, in several instances, from the domain of sober reality. It is simply childishness to state of restrictive measures, with especial reference to quarantine, that it is not the merchant who is dissatisfied with them, but the man of leisure, the tourist, whose peregrinations might be impeded by them.

The general scheme of protection for Europe adopted by the Congress certainly is submitted to the powers represented there as a subject for study rather than as a system to be at once realised: a feeble, but perhaps necessary, termination of so costly an experiment. It is to be regretted that the matter-of-fact tone of the English medical representatives—Dr. Goodeve and Dr. Dickson—and a small minority did not exercise a more potent influence over the deliberations of the Congress. It would probably have proved detrimental to that charming systematization which characterises the reports; but it would, perhaps, have led to a larger residuum of trustworthy facts and conclusions.

England has been fortunate in its delegates to the Congress. Both the political and medical elements—the former represented by the Hon. Mr. Stuart, of the Embassy at Constantinople—worked in complete accord. Dr. Goodeve, as Professor of Medicine in the Medical College, and first physician to the Medical College Hospital, Calcutta, was specially qualified to speak with authority on the important questions which

arose concerning India; and Dr. Dickson, long the physician to the British Embassy at Constantinople, an accomplished linguist, and intimately versed in all questions relating to sanitary rule or misrule in the East, was peculiarly fitted to throw light upon questions which affected the Mediterranean and Ottoman territory. The tact and ability displayed by both these gentlemen and their political coadjutor during the discussions of the Congress command the warmest admiration of the profession and the public.

The original conception and instructions of the Congress implied a belief that the transmissibility of cholera by human intercourse was the chief factor in the dissemination of the disease over the surface of the globe. Abundant evidence in support of this belief is set forth in the Report of the Congress "On the Origin, Endemicity, Transmissibility, and Propagation of Cholera." This document deals clearly and succinctly with the subjects discussed in it, and the illustrations derived from the history of the present epidemic give to it a vivid interest. The value, however, is somewhat impaired by indications of too great avidity on the part of the committee responsible for its preparation in adopting facts illustrative of the transmissibility of the disease. Thus four instances are cited in proof of the propagation of cholera by importation. They are derived from the history of the outbreaks at Constantinople, at Borchi (South-Western Russia), at Altenbourg (Saxony), and at Theydon-Bois (Essex). Two of these examples, those of Borchi and Theydon-Bois, certainly ought not, in the present state of our knowledge regarding them, to have found a place in a document emanating from the Congress. Where is the evidence in the statement of the Russian official account of the outbreak at Borchi, that the individuals earliest seized had contracted the disease at Galatz, at which town they had stayed on the 4th of August, and where, it is asserted, cholera was prevailing at the time? The English consul at Galatz, in a despatch dated the 8th of August, 1865, does not make any mention of cholera being there. He reports at that time the occurrence of a few cases of the disease at Tultcha; but it is not until the 21st of August that he writes of its presence in Galatz. At the latter date he states that the deaths were estimated at from 10 to 12 daily.* Although it may be probable that cholera existed in Galatz on the 4th of August, a probability is insufficient for the purpose of proof.

That the outbreak at Theydon-Bois should be cited as one of the most conclusive that could be found of cholera contracted in an infected locality and imported into a healthy place, is simply amazing. The first death from cholera in Southampton took place on the 24th September, 1865, the case dating from the 17th of the month.† The person first attacked at Theydon-Bois passed with her husband (subsequently attacked) through Southampton *West* by express train on the 25th September, not stopping in the town except during the ordinary halt of the train.‡ Certainly these persons traversed an infected district (or rather its outskirts, as a map of Southampton will show); but it is pushing an assumption to absurdity to conclude that a swift passage by an express train and a few moments' stay at a station furnish the material for conclusive proofs of contraction of cholera. It may be added that the sole case of cholera which had occurred in Southampton at the time took place in a locality about five and a half furlongs from the Southampton West Station, and five furlongs from the nearest point of the railway; that the person seized was not employed upon nor in any way connected with the railway; and that no cases of choleraic diarrhœa could be ascertained to have occurred along the line.

* See Mr. Radcliffe's report "On the Present Diffusion of Cholera in Europe," 8th Rept. Medical Officer of the Privy Council, p. 319. It may be well to point out that Mr. Radcliffe, in his account of the introduction of the epidemic into Borchi, has inadvertently retained the dates according to the old style.

† See, on the Southampton outbreak, Professor Parkes's masterly report—a report which is a model of epidemiological investigation. 9th Rep. Med. Off. Privy Council, p. 302.

‡ See Mr. Radcliffe's report, p. 357.

The matured deliberations of the Congress and their ultimate practical conclusions are based upon the deduction that India, and India solely, is the permanent focus of cholera; and that the disease is only known beyond its borders by propagation through human intercourse. The possibility of preventing such extension for the future is assumed; and the position laid down that the more closely measures of quarantine and other prophylactic means can be applied to the original focus of the malady, the less onerous and more efficacious (in respect to the protection of Europe) they are likely to prove. It is recommended, therefore, that the hygienic measures already being carried out in the different Presidencies, under the direction of their sanitary commissions, should receive a wider extension; and that the annual migration of Mohammedan pilgrims to Mecca should be placed under strict and regulated supervision, both economical and sanitary. A systematic inquiry into the endemicity of cholera in India, and the establishment of a series of sanitary posts on the routes crossing the north-western frontier into Afghanistan, are also suggested.

With the exception of the last one, all these suggestions merit the consideration of the Government. The circumstances under which Mohammedan pilgrims from India pursue their voyage to the Hedjaz has long been a public scandal. It is to be hoped that this expression of opinion on the part of the Congress will induce the Legislature and the public at home to give some active consideration to the question.

The further recommendations of the Congress constitute a grand scheme for the establishment of stations of observation and quarantine stations, stretching from the straits of Bab-el-Mandeb to the northern frontier of Tartary. It is suggested that a sanitary bar should be constructed on all the known routes by which cholera may find its way through Arabia and Egypt into the basin of the Mediterranean; through Persia into Mesopotamia, the Caucasian provinces of Russia (as in 1830 and 1847), or the basin of the Black Sea; and through the steppes of Tartary (as in 1823 and 1829) to the eastern frontier of European Russia. It is proposed to establish a station of observation on the Isle of Perim, at the entrance of the Red Sea, and a quarantine station near to Cape Bab-el-Mandeb, and subject to sanitary inspection every sail passing the straits northwards. The entire establishment thus recommended, it is urged, should be international in character, and regulated by the Governments most interested. The countries bordering the Red Sea, it is suggested, should be, in addition, protected by the establishment of posts of sanitary observation at the principal ports, and a complete plan for the hygienic regulation of the Hedjaz, its sacred cities, and of the pilgrimage, is set forth. This plan includes the establishment of a permanent quarantine station for the pilgrims at El Wesch, about five days' journey north of Yembu; also a station at Tor (almost under the shadow of Mount Sinai) for ordinary service. Should cholera again appear during the pilgrimage, it is recommended that all communication between the Hedjaz and Egypt should be interdicted for the moment; and if in spite of these precautions the epidemic extend to Egypt, that, during its prevalence there, that country should be shut off temporarily from maritime communication with the basin of the Mediterranean. These measures are designed to protect Europe from the invasion of cholera by way of Arabia and Egypt.

To close the westward transmission of the epidemic through Asiatic Turkey, Persia, and the Cis-Caucasus, it is suggested that a series of sanitary posts should be established on the Persian Gulf, as well as along the Turco-Persian frontiers from Basra to Bayasid, and from the latter town to Batoum on the Black Sea. On the northerly portion of this great line certain Ottoman sanitary stations already exist. In addition, recommendations are given for the regulation of Persian pilgrimages—highly important agencies in fostering and disseminating cholera in that kingdom and in the neighbouring Turkish territory.

The lines of invasion by which cholera has passed from

Persia on the one hand, and the steppes of Tartary on the other, into Russian territory, are already largely guarded by sanitary stations under Russian control. The Congress indicates where routes are left unprotected, and where additional precautions are required.

The imposing plan of international police thus imperfectly sketched is open to a fatal objection. It is confessedly founded upon a theoretical appreciation of the advantages to be obtained from a stringent system of quarantine against cholera, rather than upon a severe study of the known and probable effects of restrictive measures in checking the disease.

Mr. Simon* has made the following incisive observations, which apply with peculiar force to the recommendations of the Congress. He says:

"It may, I think, be accepted as certain, that quarantine, conducted with extreme rigour, and with the precision of a chemical experiment, will keep cholera out of any part of Europe in which the extremely difficult conditions can be absolutely fulfilled; and thus, if I speak to the dry question of medical practice, I have no hesitation in saying that England ought to resist cholera by quarantine. On the other hand, though I cannot pretend to discuss with any kind of authority the non-medical aspects of the question, it would be mere pedantry for me to ignore that facts which are of common notoriety, and considerations which are of common sense, conflict with that medical conclusion. A quarantine which is ineffective is a mere irrational derangement of commerce; and a quarantine of the kind which ensures success is more easily imagined than realised. Only in proportion as a community lives apart from the great highways and emporia of commerce, or is ready and able to treat its commerce as a subordinate political interest, only in such proportion can quarantine be made effectual for protecting it. In proportion as these circumstances are reversed it becomes impossible to reduce to practice the paper plausibilities of quarantine. The conditions which have to be fulfilled are conditions of national seclusion."

Now the Congress gives no sufficient reason for the belief that the grand scheme of restriction they suggest would be otherwise than ineffective. Assuming that portion of it which refers to the Red Sea and Egypt to have been in full operation at the time of the last invasion of Mecca by cholera, would it have been likely to have prevented the extension of the epidemic to Europe? There is barely a tittle of evidence to show the likelihood, so far as Egypt is concerned. In the present epidemic the infection of the basin of the Mediterranean was an accomplished fact before even the sensitive Sanitary Board of Alexandria felt justified in issuing a foul bill of health to ships leaving the port. Again, supposing that the British Government should permit Perim to be used as a station for the questioning of ships entering the Red Sea, how are the small native coasting vessels, those which are most to be dreaded as cholera carriers, to be subjected to the process? A somewhat clearer knowledge of the origin and diffusion of epidemic cholera in Arabia last year is required before reasonable measures of protection for the Red Sea can be devised. This knowledge the Congress does not supply, but it substitutes for it a series of bare assumptions. We shall have to recur to this subject when the report of the Congress on the course of the epidemic in 1865 is published.

* Eighth Report of the Medical Officer of the Privy Council, p. 46.

THE PROGRESS OF CHOLERA.

THE CONTINENT.

Italy.

Naples.—The epidemic, according to the latest news, was assuming formidable proportions. On the 16th September 345 cases were reported, and 236 deaths; on the 17th, 312 cases and 214 deaths. A violent explosion of the disease took place in the Basso Porto during the second week of September. Ninety-six cases occurred in this filthy street (which suffered more than any other locality of that city in the outbreak of 1865) in one day, and more than half ended fatally. The Chiaja, the West-end of Naples, has been severely visited by the malady; on several days the deaths equalled the number of new cases. The disease prevails with greater severity in the hamlets and villages in the vicinity than in the city. In Torra del Greco one hundred houses are said to have been closed, from the families having been swept off. To the 20th ult. the only places in the neighbourhood which had escaped were Sorrento, Ischia, and Capri.

Venice.—Prior to the 19th September, 6 cases of cholera and 4 deaths occurred. From the 19th to the 22nd there were no cases.

Trieste.—To the 22nd of September, 406 cases had been reported, and 220 deaths. At the date named, 10 cases occurred in the city and environs.

Goritzia and *Udine* appear to have been sharply visited by the epidemic.

Ancona and *Barletta* are said to be "again threatened."

Genoa.—September 17th and 18th (noon to noon), 24 cases, 18 deaths; 18th and 19th, 39 cases, 12 deaths.

One of the Lipari Isles is said to be infected.

Sicily.

Palermo.—News from Valetta of the 25th ult. asserts that cholera had broken out in this city among the troops despatched there to subdue the insurrectionary movement.

Egypt.

Alexandria.—Eight fatal cases of cholera, four in one family, are reported to have taken place in Alexandria on the 20th ult. The news caused a severe spasm of quarantine in Malta and the Levant. The latest information makes known the cessation of the restrictive measures against the Egyptian city.

Austria.

Vienna.—From the commencement of the outbreak to the 26th of September, 1052 cases and 393 deaths.

The epidemic is declining in Pesth.

Turkey.

Bosna Serai.—Cholera broke out in this city on the 13th of September. Five cases occurred on that and the following day. The epidemic was previously prevalent in Belgrade.

Holland.

General return for the week ending Sept. 8th: 980 cases, 669 deaths. The previous week: 1353 cases, 843 deaths.

Prussia.

Dantzig.—Week ending Sept. 20th: 44 cases, 20 deaths. Preceding five weeks: cases—338, 388, 263, 307, and 159; deaths—173, 182, 144, 184, and 191.

GREAT BRITAIN AND IRELAND.

Week ending Sept. 22nd.—Exeter—St. Thomas's Union: Cases, 14 cholera, 67 diarrhœa; deaths, 7 cholera, 1 diarrhœa. Bridgend and Cowbridge Union: Cases, 17 cholera, 32 diarrhœa; deaths, 11 cholera. Honiton Union: Cases, 3 cholera, 22 diarrhœa; deaths, 1 cholera. Scarborough Union: Cases, 2 cholera, 13 diarrhœa; deaths, 2 cholera (all these cases were French sailors belonging to a Boulogne fishing-boat). Bristol Incorporation: Cases, 1 cholera, 161 diarrhœa; deaths, 3 cholera. Leighton Buzzard: Cases, 5 cholera, 20 diarrhœa; deaths, 3 cholera. Prescot Union: Cases, 1 cholera, 17 diarrhœa; deaths, 1 cholera. Merthyr-Tydvil Union: Cases, 658 cholera and diarrhœa; deaths, 39. Pocklington Union: Cases, 4 cholera, 7 diarrhœa; deaths, 3 cholera, 1 diarrhœa. Toxteth-park Union: Cases, 436 cholera and diarrhœa; deaths, 28. Swansea Union: Cases, 455 cholera and diarrhœa; deaths, 68. Sunderland Union: Cases, 14 cholera, 13 English cholera, 27 diarrhœa; deaths, 6 diarrhœa. Southampton Union: Cases, 1 cholera, 29 diarrhœa; deaths, 2 cholera, 1 diarrhœa. Liverpool parish: Cases, 168 cholera, 124 diarrhœa; deaths, 2 cholera, 1 diarrhœa. Pontypridd Union: Cases, 9 cholera, 210 diarrhœa; deaths, 4 cholera, 1 diarrhœa. Newton Abbott Union: Cases, 2 cholera, 96 diarrhœa; deaths, 1 cholera, 4 diarrhœa.

Week ending September 29th.—Pocklington Union: Cases, 3 cholera, 3 diarrhœa; deaths, 3 cholera. Liverpool Parish: Cases, 101 cholera, 87 diarrhœa; deaths, 44 cholera, 2 diarrhœa. The Registrar-General gives the following returns for the whole town:—Deaths from cholera (week ending Sept. 29th) 116. In the six previous weeks the numbers were respectively 157, 146, 225, 145, 182, and 159. Exeter, St. Thomas's Union: Cases, 13 cholera, 71 diarrhœa; deaths, 10 cholera, 4 diarrhœa.

Sunderland Union: Cases, 8 cholera, 18 English cholera, 22 diarrhœa; deaths, 7 cholera. Manchester and Salford: 14 deaths from cholera.

The Metropolis.—Week ending the 29th of September: 177 deaths from cholera, 67 from diarrhœa. Of these, 12 deaths from cholera, and 9 from diarrhœa, occurred in the West; 36 from cholera, and 11 from diarrhœa, in the North; 28 from cholera, and 17 from diarrhœa, in the Central; 55 from cholera, and 48 from diarrhœa, in the East; 46 from cholera, and 12 from diarrhœa, in the South districts. The deaths from cholera in London during the last thirteen weeks have numbered 4714, and from diarrhœa 2298.

"The cholera matter," observes the Registrar-General, "is now diffused very equally all over London; and as the waters of the Thames, of the Lea, and of the wells become infected, the utmost exertion of the authorities will be required to ensure its decline. Each Health Officer should consider that the safety, not only of the people of his own district, but of three millions of people, depends on his activity. It is to be regretted that these inadequately paid officers cannot devote the whole of their time to the duties of their important office."

The Registrar-General's weekly return for the Metropolis (Sept. 29th) contains some important calculations on the influence of elevation on the distribution of the mortality during the present epidemic.

Dublin.—Week ending Sept 29th: 98 deaths from cholera. Four previous weeks: 41, 52, 55, and 65.

CASE OF POISONING BY STRYCHNINE AT WARDLEY.

AN inquest of a very painful character has been lately held at Wardley, in Rutlandshire, on the body of Mrs. Sinkin, a lady who died on the 9th ult. with all the symptoms of poisoning by strychnine. The evidence produced before the coroner showed that the deceased had been under the care of Mr. Spencer, a highly respectable practitioner of thirty years' standing, residing at Hallaton. She had been taking medicine for some time, and on the above-mentioned day her husband called at the house of Mr. Spencer for a repetition of her medicine. After taking a dose of it she was seized with all the symptoms which are characteristic of poisoning by strychnine, and died in about twenty minutes. Mr. Spencer, on being summoned to her assistance, was so convinced that the medicine which had been sent from his house contained bismuth, and not strychnine, that he immediately swallowed a dose of it, and was at once seized with similar symptoms. His life was saved with difficulty by Mr. Bell, a neighbouring practitioner.

The viscera of deceased and the remains of the medicine she had been taking were subsequently forwarded to Professor Taylor, in London; and when examined before the coroner that gentleman stated as the results of his analysis that the medicine contained in a dissolved form brucia and strychnine in the proportion of 1·7 grain to an ounce, the brucia, from its greater solubility, being in larger proportion. A sediment at the bottom of the more fluid part of the medicine was found to be nearly pure strychnia. A quarter of a grain of the sediment produced tetanic convulsions in a rabbit in thirty minutes, and caused the death of the animal, with the usual symptoms of strychnia poisoning, in ten minutes more. There was no bismuth found, although the prescription stated that it had contained bismuth. The liquid portion contained much brucia, with some strychnia. Three tablespoonfuls, the dose marked on the bottle, would be equivalent to nearly two ounces; hence such a mixture would contain in a single dose, if it were shaken, a fatal dose of strychnia. Half a grain of strychnia had proved sufficient to destroy the life of a human adult in twenty minutes, and in the sediment alone there was enough to kill sixteen persons. The stomach contained three ounces of partly-digested food, in which was starchy matter; the stomach was quite healthy, and its contents presented the appearance usually seen in the bodies of persons who had died suddenly in a state of health and while digestion was going on. The application of the usual tests and processes to the stomach, duodenum, and œsophagus, as well as to their contents, showed that strychnine was present in small quantity in each case. The largest proportion was found in the duodenum. Some powdery matter scraped from the surface of the œsophagus was by the usual tests found to be strychnine. Taking these facts and the statements in the depositions—namely, that deceased took a dose of the mixture and died in about half an hour afterwards,—he was of opinion that her death was entirely due to strychnine.

The jury, after consulting a short time, returned a verdict that the "deceased died from strychnine, administered by Mr. Spencer with gross neglect."

Upon the delivery of the verdict Chief Constable Mitchell, who had been present during the proceedings, took Mr. Spencer into custody on the charge of manslaughter. He was shortly afterwards admitted to bail, himself in £500 and two sureties in £250 each. The case will be tried at the next assizes.

No evidence was adduced at the inquest to show by whom the medicine was prepared, but this of course will be forthcoming at the trial. In the meantime we must deprecate the manner in which this unfortunate case has been commented on by some of our contemporaries. It is manifestly unfair to criticise adversely the conduct of one in the painful position of Mr. Spencer while the case is *sub judice*. That a lamentable mistake was made by some one must be admitted, but that is no just reason why the mass of general practitioners of this kingdom should be accused, as they have been, of carelessness as to the mode in which medicines are prepared by themselves or their agents. There are nearly 20,000 gentlemen in general practice who will regard this charge against them as most unjustifiable. Until the trial shall have been concluded comment as to where the fault really lies should be withheld.

CHOLERA CORRESPONDENCE.

MR. CHARLES TRENERRY (of the Civil Hospital, Gibraltar) writes: "The local application of chloroform has proved a most valuable adjunct in my hands during our late epidemic of cholera, in relieving the distressing paroxysms of pain and cramps which tend so greatly to exhaust the patient and terminate his life. Such, in fact, was the relief produced that many patients begged me to reapply it even during their convalescence, as was witnessed by different clergymen and other members, who fearlessly, and with a most philanthropic spirit, visited our cholera wards. And I feel convinced that the recoveries would have been greater if the unfortunate patients had not been sent into hospital in such an advanced stage of the disease: some of them only survived three, four, or six hours, and a few actually died before they could be put into bed; but the average duration was a little more than two days, and the average recoveries occupied about twelve days. One hundred and fifty-five cases of cholera were admitted into the Civil Hospital at Gibraltar from the 19th of August to the 22nd of October, 1865, when the disease appeared to have ceased; of which 87 were males and 68 females, averaging from twenty to seventy years of age. And of these it fell to my lot to attend 117 cases; out of which I lost 46—say from the 9th of September, the day I returned from London, having been recalled from leave of absence. The plan of treatment which I pursued was to have the patient placed between hot blankets, and a piece of lint saturated with chloroform applied to the pit of the stomach, and evaporation prevented as much as possible by retaining a folded towel over it. The first impression was intense cold, soon followed by a burning sensation, which generally alarmed the patients, and it was difficult to calm their fears unless I changed the application from side to side. Sometimes I applied it in the course of the crural, sciatic, or median nerves, and along the spinal column; occasionally I caused them to inhale some, but not to the extent of anæsthesia. The extremities were frequently rubbed with hot flannels, and sinapisms applied to the abdomen or the calves of the legs. A mixture, composed of brandy, aromatic spirits of ammonia, compound tincture of lavender, and water, was given frequently; and cold water (there being no ice), effervescent draughts, and good beef-tea allowed *ad libitum*. As soon as a favourable reaction set in I directed five grains of trisnitrate of bismuth, and a quarter of a grain of acetate of morphia, to be given in powder every three hours, assisted by an occasional enema consisting of twenty minims of tincture of opium and two ounces of starch mucilage, by which means the vomiting and diarrhœa were generally relieved; afterwards tonics, astringents, and generous living completed the recovery."

Dr. N. GEISSE (Bad-Ems) gives the following plan of treatment as practised by himself:—"*Steam-baths:* They increase the stream of the blood towards the external parts, produce warmth and perspiration. *Inhalations of Ozone:* Repeated rotations (from twenty to thirty each time) of an electrical machine develop ozone in the sick room; the inhalation of it raises the action of the heart, bloodvessels, and respiration; it increases warmth, brightens the face, and affords muscular power. *Phosphorus:* From five to ten drops of a solution (one grain of phosphorus and two drachms of spirits of wine) repeated from every half-hour to every two hours, according to the severity of the case. Phosphorus produces energetic activity of the heart, nerves, muscles, and bloodvessels; it increases warmth, vivifies all intellectual and corporeal powers, and augments the secretion of urine. Whilst steam-baths and ozone inhalation are only usually available in hospitals, phosphorus cannot be too highly recommended in private practice. Plenty of drink—as water, wine, brandy, beef-tea—is very necessary."

Dr. JULIUS ALTHAUS observes: "Some experiments which were lately made by Professor Horn, of Munich, seem to bring us a step in advance in our efforts to determine the nature of the choleraic poison. He connected the prime conductor of an electrical machine, the plate of which had a diameter of not less than three feet, with one end of a copper-wire, the other end of which was put into a tumblerful of water. The machine being put in action, this water was promptly ozonised. On the other hand, it was found that if one end of the wire was connected with the *cushions* instead of with the plate, so as to receive negative electricity, the water was impregnated with a cyanide. A person who frequently smelt at this water, and drank some of it, was seized with symptoms of severe cholerine, which were, however, quickly arrested by drinking some of the ozonised water. In presence of these experiments it seems to me very important that the drinking-water of our present cholera fields should be examined for cyanides, more especially as there is considerable analogy between the symptoms of cholera and those of poisoning by cyanides. Many facts which have been brought to light by previous experience might be satisfactorily explained by assuming the choleraic poison to be a cyanide. Thus we know that water which has been boiled does not propagate cholera, which might thus be accounted for by the circumstance that all cyanides, when heated in the presence of water, are destroyed. Again, the undoubted efficacy of sulphuric and other acids in arresting the premonitory symptoms of the disease might be explained by the power mineral acids possess of decomposing cyanides; and the failure of acids in the fully-developed disorder might be seen to depend upon the fact that acids, as such, only reach the alimentary canal, but not the blood. Lastly, we know that after storms, when the air is strongly ozonised, a decrease of cholera generally takes place; probably, again, owing to ozone decomposing the cyanic poison. Might we not, therefore, in view of the failure of all methods of treatment hitherto adopted, employ ozonised water as an antidote in the treatment of cholera? And might we not use means of artificially ozonising the air of our present cholera districts?"

Mr. JOHN BUTTERS (Liverpool) writes:—"During the prevailing epidemic of cholera, I have several times observed roseolar eruptions in cases where opium had not been administered. The rash sometimes closely simulates measles. In one case, a child of parents who had died of cholera, this measly eruption appeared before the ordinary symptoms of cholera came on, and was actually mistaken for measles, and sent to hospital, where cholera soon manifested itself. In other cases, I have observed during the secondary fever a rash closely resembling, if not identical with, the mulberry rash of typhus, making the case so much like one of that disease that diagnosis would have been almost impossible without a knowledge of the previous history of the case."

Correspondence.

"Audi alteram partem."

CERTIFICATES OF LUNACY.

To the Editor of THE LANCET.

SIR,—Without attempting to invalidate the judicious remarks made by you on the utility of the Commissioners in Lunacy, in relation to the case of attempted suicide for which I gave a certificate that was not considered valid, I desire to offer two or three suggestions on a point of medical jurisprudence.

I think that in the proceedings of the Commissioners there should be more of the medical element and less of the legal. For instance, in my case, had the order of the Commissioners for the dismissal of the patient from the asylum been carried out, and suicide subsequently effected, it would have been a poor consolation to the Commissioners, who allowed that the woman was insane, to fall back on the fact that they had acted on the strict letter of the law. I would humbly suggest that it would be far better for the Commissioners to receive and act upon a medical opinion that is founded upon well-authenticatd facts, than allow the risk to be run of a patient committing suicide, which might be prevented by proper restraint. Should it be thought expedient, let the witnesses to such facts be examined on oath before the committing magistrates. Such a proceeding would be in strict accordance with the every-day practice of criminal courts, where both judge and jury are continually influenced by, and act upon, the opinion of the medical witness, founded upon facts communicated by others, or hearsay evidence. It is not unfair to presume that in the trial of the notorious Palmer much weight was attached to the opinion, founded on hearsay evidence, of the late Sir Benjamin Brodie and of other medical witnesses. Let me remark, in conclusion, that there are numbers of cases of lunatics, especially in monomaniacs, where a formal medical examination would fail to detect symptoms of insanity which might be plainly manifest to those who were in constant communication with them.

I remain, Sir, your obedient servant,

Ludlow, Sept. 30th, 1866. HENRY MEYMOTT.

*** Our correspondent has not quite understood our remarks on his former letter. In his present one he seems to mistake the functions of the Commissioners in Lunacy. They do not make the law; they administer it. Insanity being a disease, it is fitting that medical men should decide upon its existence, and the law allows them to do so under certain restrictions, which should be well understood, and most strictly obeyed. The suggestion that two witnesses should swear to facts they observed, and that on their certificates, certificates of lunacy should be signed, would alter the whole character of certificates, which should be solely medical. In our opinion, the Commissioners would have neglected their duty if they had not insisted upon the amendment of the certificate in question. We shall take an opportunity of examining how far attempts at suicide ought to be taken as proofs of unsoundness of mind.

REGINA *VERSUS* TOOMER.

To the Editor of THE LANCET.

SIR,—The accompanying letter I received some few days since from Dr. Brinton, and as he authorises me to make whatever use of it I think fit, I send it you.

I am, Sir, your obedient servant,

Reading, Oct. 3rd, 1866. OLIVER CALLEY MAURICE.

24, Upper Brook-street, Grosvenor-square, Sept. 19th, 1866.

DEAR MR. MAURICE,—If the expression of my opinion, as that of a lecturer on Forensic Medicine during many years at one of the largest British hospitals, can at all serve the ends of justice in the case of Toomer, you are welcome to make what use of it you may think fit.

I am not Toomer's advocate, and therefore do not hesitate, for the sake of truth generally, to risk part of the force of what I may say as to his case, by enunciating the broad proposition (however many may dissent from it) that on physiological grounds the possibility of rape demands something more than the ordinary disparity of strength between the two sexes. Whether that disparity be of age, numbers, or strength—including in the latter, narcotism, syncope, &c.,—the presumption of its having existed ought always to be raised by the evidence. The yielding of the alleged victim is, of course, possible enough; and the motive for yielding—fear of death, or what not,—a very proper question (and a very difficult one) for a jury. Medically, however, such a yielding takes the case out of the category of rape, and deprives us of medical evidence *pro* or *con.*, and is (of course) quite inapplicable to

cases in which the prosecutrix claims to have resisted to the last.

I carefully read the medical evidence in Toomer's case. It is hardly necessary to say that it utterly contradicts the conclusion which the jury seem to have arrived at. It would be an insult to the profession, and a needlessly disgusting task, to put, side by side with the depositions in Toomer's case, the details of an average instance from the vast casuistry of Forensic Medicine.

The non-medical evidence I forbear to go into, being unable to add one word to the really admirable handling it has received from our English press. But I can add that an eminent foreign jurist, with whom I lately spent a long railway day abroad, was fairly horrified at the miscarriage of British justice exhibited in this shocking case.

Ever, dear Mr. Manrice, yours very sincerely,

WILLIAM BRINTON.

TREATMENT OF CHOLERA.

To the Editor of THE LANCET.

SIR,—Feeling it to be the duty of every medical gentleman to communicate the results of his experiences at this time for the public benefit, I offer no apology for troubling you with these few lines, the fruit of fifty years' practice, believing that we are all acting from like motives.

Without wasting time in discussing theories on cholera, when the moment for prompt action has arrived, I felt it to be of the greatest importance to endeavour to allay the excessive action of the intestines. I found no agent more powerful than opium. I used it in 1832 and every subsequent outbreak of cholera with happy effect, and I found that the earlier in the attack it was administered the less was the quantity required and the more favourable was the result. Two grains of *the powder* of opium (the finer divided the more efficient) given to an adult in the first stage has often been sufficient to arrest the cramps and purging, but I have repeated that quantity in less than two hours, and again in three or four hours, until the command of the bowel was attained. Restoratives, such as beef-tea, brandy, port wine, &c., and of medicines, chloric and sulphuric ethers, ammonia, camphor, *et iis similia*, given in small quantities and at short intervals, as the vomiting permitted.

Under this treatment the cramps generally subsided, and the choleraic discharge was so reduced that the immediate danger was averted, and time gained for other applications; but *pari ratione*, I could not administer medicines the known effect of which is *to produce increased action in the bowels.*

Selecting two patients who came under my care on Sept. 30th, and in whose treatment I have been most kindly aided by Mr. Beale, of Long-acre: the female required twelve grains and the male ten grains, and both are now (Oct. 3rd) slowly emerging from the state of collapse in which I found them.

In 1849 a female patient required eighteen grains before the beneficial result was attained, but she lives *now*, a proof of the efficacy of the treatment; any inconvenience following from head symptoms being the least of two evils, and more easily remedied than cholera.

I am, Sir, yours very faithfully,

JAMES LEONARD, M.R.C.S.,
District Medical Officer, St. Martin-in-the-Fields.

Salisbury-street, Strand, Oct. 1866.

NEWCASTLE-ON-TYNE.

(FROM OUR OWN CORRESPONDENT.)

FROM the medical report of that excellent institution, the Convalescent Home at Marsden, it appears that "during the past year there were 222 admissions: an increase of 58 over the year 1864. Of the number, 104 had been previously in the Newcastle Infirmary, 93 having been received free of payment. At the commencement of the year 6 patients were undergoing their term of residence, making the aggregate of 228 individuals recovering from the effects of operations, accidents, debility after illness or consequent upon some constitutional weakness, for whom a change of air to the seaside has been provided during the past year. Anterior to the time referred to, 323 patients had been admitted. Thus since the Home was opened in December, 1862, 551 poor persons, disabled by sickness, have participated in its benefits." From the amount of good effected by this little institution, which has well earned a high position in the estimation of the profession and the public, some idea may be formed of the benefits likely to proceed from the operations of the noble institution about to be erected at Whitley.

With regard to cholera, although we hear of occasional cases occurring here and in the neighbouring towns, it does not appear to assume an epidemic form, nor is there any unusual amount of diarrhœa prevalent. Sunderland, however, appears to be threatened with an outbreak. Dr. Evans has reported six additional cases of Asiatic cholera from there as occurring last week, of which four proved fatal.

Scarlatina and measles are very prevalent here: the former is of the malignant type; the latter is mild, and prevails most extensively. There has been quite an outbreak of measles at the Newcastle Union Workhouse, where Mr. Hardcastle has treated about sixty-six cases, and has been fortunate in having only two deaths. The workhouse occupies a very healthy situation, and this may account in some measure for the low mortality which has prevailed; but it is also due in part to the careful nursing the patients received, and the judicious means which were taken to prevent a concentration of the infection.

The Sanitary Act is working well here; and if our authorities persevere in putting into force the powers given them by the provisions of this wholesome enactment, Newcastle and the sister borough (Gateshead) may some day arise purified, even without *fire*, which has hitherto, it must be admitted, effected more permanent good than any number of magistrates' orders; for, under the old systems, tenements were only closed up under the panic of pestilence, to be opened in a worse state than before when the hurricane had abated. Here is an example from a group of cases brought before our magistrates on September 28th:—"The defendant was charged with having four rooms so damp and dilapidated as to be unfit for human habitation, a nuisance, and injurious to health. The inspector found two of the rooms down stairs occupied by Peter Smith, his wife, and six children. The two rooms up stairs were inhabited by James Wilson, his three children, and his housekeeper. The ceilings were wet and hanging, and in one room entirely off, so that the apartment was quite open to the sky. The windows were broken; and in a small back place was an open privy, which had never been cleared out for years." If the proprietors of such dens were poverty-stricken themselves, of course there would be abundant excuse for their condition; but it is not so, in most instances at all events, here. The owners are persons in good positions, reaping large profits from these miserable habitations. Would that they could be compelled to occupy these tenements themselves for a period!

Newcastle-on-Tyne, Sept. 29th, 1866.

FRENCH JURISPRUDENCE.—Duke Caderousse-Gramont died a short time ago of phthisis, leaving the bulk of his large fortune to his physician, Dr. Déclat. The Duke's prodigality had been so notorious that the family had interfered a few years ago and obtained some control over the property. Piqued at these proceedings, the deceased had intended, by his will, to frustrate the rightful heirs. The latter attacked the will, and easily had it declared null and void, as, by the French law, the medical man in attendance on a testator cannot be made heir to the latter.

SLOUGHING TREATED BY THE DIPSACUS SYLVESTRIS.—M. Beullard states, in a paper addressed to the Academy of Sciences of Paris, that for the last fifteen years he has successfully controlled gangrenous wounds with the green leaves of the *Dipsacus sylvestris* carefully chopped and pounded. The author, after having removed all sloughing shreds, washes the wound with chlorinated water and fills it with the chopped leaves. This needs to be changed but once in twenty-four hours, and in two days the wound looks healthy and granulating. As the stem remains green only during the latter part of the spring and the beginning of summer, the aqueous extract may be used with the best results, made into a paste with water. [This may be quite correct; but it should not be forgotten that nitric acid followed by the old carrot poultice is quite as efficacious, if not more so.]

DR. HILL has conducted, by order of the Poor-law Commissioners, a sworn investigation into a charge of neglect in a cholera case brought against Dr. Murdock, one of the medical officers of the dispensary, Donnybrook.

HASTINGS' MEMORIAL FUND.

THE following sums have been received towards the Memorial Fund for Sir Charles Hastings, the founder and late president of Council of the British Medical Association :—

Dr. Waters, President...	...	£3	3	0	Spencer Wells, Esq. ...	...	£5	5	0
Professor Stokes, M.D.	...	10	0	0	Dr. Lawford	...	1	1	0
H. D. Carden, Esq. ...	...	5	5	0	G. P. Hodgson, Esq. ...	...	0	5	0
Dr. H. Day	...	3	3	0	John Dreuer, Esq. ...	...	0	5	0
Dr. J. Edwards	...	3	3	0	Dr. Ryott	...	0	10	6
Ellis Jones, Esq.	...	3	3	0	W. F. Lyde, Esq....	...	1	1	0
Dr. Sibson, F.R.S. ...	...	3	3	0	Dr. Kelly	...	0	10	6
T. H. Smith, Esq....	...	3	3	0	W. J. Square, Esq. ...	...	0	13	0
Thomas Turner, Esq. ...	...	3	3	0	Dr. Thomson, R.N. ...	...	1	1	0
I. Baker Brown, Esq. ...	...	2	2	0	Thos. Martin, Esq. ...	...	1	1	0
M. H. Clayton, Esq. ...	...	2	2	0	Dr. Wades	...	0	5	0
T. T. Griffith, Esq. ...	...	2	2	0	H. L. Prichard, Esq. ...	...	1	1	0
W. Hey, Esq.... ...	...	2	2	0	T. H. Bartleet, Esq., M.R....		0	10	6
Dr. Jeaffreson	...	2	2	0	Professor Humphry, M.D....		1	1	0
George Southam, Esq....	...	2	2	0	Dr. Black	...	1	1	0
Dr. Wilkinson	...	2	2	0	Dr. Scowcroft	...	0	10	6
J. S. Bartrum, Esq. ...	...	1	1	0	Thos. Owen, Esq.... ...		0	5	0
Geo. Bottomley, Esq. ...	...	1	1	0	Thos. Lingen, Esq. ...	...	1	1	0
W. J. Church, Esq. ...	...	1	1	0	E. T. Griffith, Esq. ...	...	0	5	0
D. Clark, Esq.	...	1	1	0	J. G. Wales, Esq.		1	1	0
Dr. Falconer	...	1	1	0	C. Vyse, Esq.	...	1	1	0
Saml. Hey, Esq.	...	1	1	0	Jos. Blackshaw, Esq. ...	...	0	5	0
Dr. Hooper	...	1	1	0	W. W. Thomas, Esq. ...	...	0	10	6
J. R. Humphreys, Esq. ...		1	1	0	Dr. Sieveking	...	1	1	0
J. Hutchinson, Esq. ...	...	1	1	0	Dr. Walker	...	1	1	0
T. Eyton Jones, Esq. ...	...	1	1	0	Professor Syme	...	1	1	0
J. Z. Laurence, Esq. ...	...	1	1	0	J. L. Parker, Esq. ...	...	0	5	0
C. Lingen, Esq.	...	1	1	0	G. E. Stranger, Esq. ...	...	0	10	6
Dr. Markham	...	1	1	0	J. H. Clouteny, Esq. ...	...	0	10	6
T. Mellor, Esq.	...	1	1	0	W. Bodington, Esq. ...	...	0	10	6
C. H. Moore, Esq. ...	...	1	1	0	Dr. Barnes	...	2	2	0
Dr. E. Morris	...	1	1	0	Dr. Smallman	...	0	5	0
Dr. Paget	...	1	1	0	E. Parker, Esq.	...	0	10	6
Dr. Philipson	...	1	1	0	Dr. Radclyffe Hall ...	...	1	1	0
Dr. Richardson	...	1	1	0	R. Jefferson, Esq.... ...		0	10	6
Dr. Simpson	...	1	1	0	J. Hepworth, Esq. ...	...	1	1	0
Dr. Skinner	...	1	1	0	T. H. Graham, Esq. ...	...	0	5	0
Dr. Stewart	...	1	1	0	W. C. West, Esq.		2	2	0
G. Turner, Esq.	...	1	1	0	W. H. Manifold, Esq. ...		1	1	0
Dr. Turnour	...	1	1	0	Dr. T. Thomson		2	2	0
Dr. Edwd. Williams ...	...	1	1	0	G. E. Horton, Esq. ...	...	1	1	0
T. Watkin Williams, Esq. ...		1	1	0	Dr. Prichard	...	1	1	0
C. L. Allwork, Esq. ...	...	0	10	6	George Critchett, Esq. ...		1	1	0
C. S. Barter, Esq.... ...		0	10	6	Professor Christison, M.D....		1	1	0
Dr. Bott	...	0	10	6	Dr. Croker		1	1	0
John Burrows, Esq. ...	...	0	10	6	— Forsyth, Esq.		1	1	0
Dr. Davey	...	0	10	6	Dr. Merriman	...	0	10	6
John Firth, Esq.		0	10	6	Dr. Eddowes	...	0	10	6
Dr. W. Fuller...		0	10	6	Dr. Hawkins	...	0	10	6
J. G. Hardy, Esq.... ...		0	10	6	Messrs. Garlike, per W. C. West, Esq.... ...		2	2	0
Dr. A. Henry...		0	10	6	H. H. Parry, Esq.... ...		1	1	0
James Rhodes, Esq. ...		0	10	6	Professor Maclagan ...		1	1	0
A. B. Steele, Esq.... ...		0	10	6	R. Wiseman, Esq.... ...		0	10	6
H. B. Steele, Esq.... ...		0	10	6	Dr. Ward	...	0	10	6
Thomas Webster, Esq. ...		0	10	6	R. Shipman, Esq.... ...		0	10	0
Henry Whitfield, Esq....		0	10	6	C. Richardson, Esq. ...		0	5	0
Dr. Nevins		0	10	0	J. B. Collyns, Esq. ...		1	1	0
J. D. Weaver, Esq. ...		0	5	0	Dr. Wildash	...	0	10	0
Dr. Rutherford		0	5	0	W. J. Clement, Esq., M.P....		2	2	0
Dr. Watkins		0	5	0	Dr. C. Holman	...	1	1	0
Dr. Jas. Seaton		0	5	0	Dr. Jackson	...	1	1	0
Thomas Paget, Esq. ...		1	1	0	W. Prescott, Esq.... ...		1	1	0
T. P. Teale, Esq.		3	3	0	R. Flint, Esq....		1	1	0
T. P. Teale, Esq., jun....		1	1	0	Dr. Billing	...	1	1	0
W. Dalton, Esq.		1	1	0	R. Pitt, Esq.	...	0	10	6
E. Bartleet, Esq.		2	2	0	Dr. Sandwith	...	0	10	6
Dr. Jenkins		0	10	0	J. Renton, Esq.		0	5	0
Dr. Brett		0	5	0	M. A. B. Corbyn, Esq....		0	5	0
John Bush, Esq.		1	1	0	Sir Jas. Bardsley, M.D.	...	3	3	0
Thomas Pope, Esq.		0	5	0	H. C. Metcalf, Esq. ...		0	10	6
G. Daglish, Esq.		0	10	6	A. Leslie, Esq.		0	10	0
Dr. Parratt		1	1	0	Dr. Geo. Budd		2	2	0
Dr. Hughes		1	1	0	Dr. Sympson		1	1	0
Dr. Carlyle		0	10	6	R. T. Morris, Esq. ...		0	10	0
Dr. Birch		1	1	0	C. Johnson, Esq.		0	5	0
R. Blaikie, Esq.		0	10	6	Dr. Hall		0	5	0
J. Hakes, Esq.		0	10	0	Dr. Harper		0	5	0
Dr. Hatton		1	1	0	J. Essex, Esq.		0	5	0
S. Watson, Esq.		0	5	0	H. MacColl, Esq.... ...		0	6	0
J. Ellerton, Esq.		2	2	0					
Dr. Swaine		1	1	0					

Gentlemen desirous of contributing, whether members of the Association or not, are requested to forward their donations to the treasurer, Dr. Falconer, Bath; or to Mr. Watkin Williams, general secretary, 13, Newhall-street, Birmingham. Subscriptions will also be received at THE LANCET Office.

MEDICAL CHARITIES.—The friends of the following institutions will be glad to learn that the late Richard Saunders, Esq., has bequeathed £500 to the Earlswood Asylum for Idiots, and £100 to the Surrey Dispensary, Dover-road; and the late William Worthington, Esq., of Stilton, Hunts, has bequeathed £200 to the Huntingdon Infirmary or Hospital.

Medical News.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—At a general meeting of the Fellows held on Tuesday, Oct. 2nd, the following Members of the College were duly admitted Fellows of the same :—

Hicks, John Braxton, M.D. Lond., St. Thomas's-street.
Latham, Peter Wallwork, M.D. Cantab., Cambridge.

At the same meeting, the following gentlemen, having undergone the necessary examination, were duly admitted Members of the College :—

Beigel, Hermann, M.D. Berlin, Finsbury-square.
Lomas, William, M.D. St. Andrews, Harley-street.
Waring, Edward John, M.D. St. Andrews, Talbot-villas, Westbourne-park.

The following Extra-Licentiate was also admitted a Member of the College :—

Forbes, John, Addison-road, Kensington.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the Science and Practice of Medicine, and received certificates to practise, on Sept. 27th :—

Baker, Benjamin, Framlingham, Suffolk.
Beckett, Francis Mears, Hitchin, Herts.
Davidson, Thomas, Forres, Morayshire, N.B.

The following gentlemen also on the same day passed their first examination :—

James Howard, Manchester School of Medicine; Frederic Rainbow, St. Thomas's Hospital; Geo. Arthur Woods, Liverpool Royal Infirmary.

At the preliminary examination in Arts held at Apothecaries' Hall on Sept. 28th and 29th, 110 candidates presented themselves, of whom 31 were rejected, and the following 79 passed :—

Thomas Allen, W. M. Atkinson, Edwin Barnes, J. R. Benbow, Arthur Bentley, J. E. Birch, A. M. Branfoot, F. G. M. Brittin, Jas. Bunting, Chas. Butler, J. F. Carolan, Stafford T. Cass, Louis Colbourne, G. Martin Cole, S. F. Conolly, E. Harvey Cooke, Walter Cornelius (certificate of special proficiency), E. R. Cowcher, W. E. Crowther, R. S. Davenhill, G. G. Day, C. W. S. Deakin, S. L. Dobbie, Wilson Eager, A. J. England, J. H. Ewart, Edward Flint, H. Courtenay Fox (certificate of special proficiency), J. A. Freeman, Arthur Graham, Richard Fairleigh Grant, Geo. James Gray, Collett Harbord, Andrew Harris, Wm. H. Harris, Richard Harrison, A. F. Holden, A. C. Horner, Jas. James, W. Pearce Jago, John Jolliffe, Joseph Kindon, T. Warner Lacey, F. G. Larkin, Fred. J. Laws, John Leyland, Wallis McDonald, A. Mahomed, E. A. Marsh, Josh. Mandsley, H. Meadows, Michael Miller, Andrew Nance, C. H. Newby, H. Carden Noad, F. R. Nurthen, S. Holgate Owen, H. D. Palmer, W. Paulson, C. J. W. Pinching, G. E. Power, E. J. Ramsay, James Reed, W. Roberts, R. Pryme Robey, Edmund Robinson, Chas. Russell, Wm. Russell, C. P. Skrimshire, Nathan Smedley, G. T. Stockwell, G. R. Tooze, Benj. Tubb, W. A. E. Waller, B. S. White, T. W. T. Williams, J. R. Williamson, A. Winterbottom, Edwin B. Wood.

THE quarantine at Tunis on arrivals from Malta has been removed.

FOUR thousand deaths from the famine in Orissa have been registered.

IT is stated that in a single week no less than 66,000 gallons of milk were delivered at Paddington station alone.

ACCORDING to the last census, the population of Italy was 23,000,000; the annexation of the new provinces will raise it to fully 25,000,000.

PERSONS entering Italy from France are still put in quarantine. The dirt and bad arrangement of the Italian towns are great means of increasing the epidemic when it once begins.

THE Registrar of the city of Boston reports that in the year 1865 the births in that city were only one in thirty-six of the population.

A QUARANTINE of fifteen days has been imposed upon all vessels arriving at Malta from Dublin, and of ten days upon those from Tunis.

THE return of the state of pauperism for London shows an increase of 14 per cent., the number being somewhat over 90,000 in July, 1865, but 103,000 in July, 1866.

ON Monday an Act of Parliament came into force for the better prevention of disease at military and naval stations. Hospitals are to be provided, and visiting surgeons appointed. The expenses to be defrayed by Parliament.

THE wife of Lord Romney's gamekeeper gave birth a short time ago to three living children, and on Sunday the triplets were christened at St. John's Church, Mote-park, Maidstone.

THE Hunterian Society, which for many years has met in Bloomfield-street, Finsbury, has removed to the London Institution, Finsbury-circus. Its first meeting will be held on Wednesday next: the Council at half-past seven P.M., and at eight Dr. Dalby will read a paper on Cholera.

DURING the week ending September 29th 4574 births and 3176 deaths were registered for London and twelve other large towns. The births for London were 2146, and the deaths reached 1418. During thirteen weeks the deaths from cholera number 4714.

CHARCOAL PEGS FOR ACTUAL CAUTERY.—These are lighted and burn like a cigar, the end being somewhat pointed. They should be applied in a direct horizontal line, because pressure sideways would break the point. The composition is as follows:—Powdered charcoal, 300 grains; nitrate of potash, 22 grains; gum tragacanth, 75 grains; water, 360 grains. Mix into a mass, and roll it into the shape of ordinary lead-pencil, about three inches long. Very few ashes are yielded, and when any form, they may be blown away, the current of air thus keeping up combustion.

COUNTY COURT, NEWCASTLE-ON-TYNE: A. SCOTT GELL *v.* WM. HINDMARSH.—Mr. Steavenson for plaintiff, and Mr. Robinson for defendant. Plaintiff, who is a surgeon at Aycliffe, sued the defendant, a labourer at the same place, for £3 8*s.* 6*d.*, the amount of account for attendance upon, and medicine supplied to, defendant and his wife. Mr. Steavenson contended that as plaintiff was only a surgeon, and not an apothecary, he could not recover for either attendance or medicine. Defendant's wife had been suffering from inflammation of the bowels, and, in answer to his Honour, plaintiff said he had had to apply mustard and other blisters, which he considered part of his surgical duties.

His Honour thought that it was rather a strange doctrine, that if a surgeon performed an operation and gave medicine in order to bring his patient into a proper state, he was not to be allowed to recover for it.

Mr. Steavenson submitted that there were three distinct branches of the profession—a physician, a surgeon, and an apothecary,—and if a surgeon practise medicine without being an apothecary, then he is not entitled to recover for it. If a surgeon was allowed to practise medicine, and recover for it, then what was the use of becoming a licentiate of the Apothecaries' Hall?

His Honour: If a gentleman is registered as a surgeon, and medical science is incidental to the application of his surgical duty, he is entitled as incidental, and as part of his claim, to recover.

Evidence was given on the part of defendant that plaintiff had refused to attend his wife when requested, had gone to the house at eleven o'clock intead of six one evening, and had ultimately refused to attend at all, in consequence, as he stated, of defendant's family being insolent to him.

His Honour considered that after a doctor had undertaken a case he was compelled to attend it until he effected a cure or was dismissed by the person requiring him, or gave up the case on some reasonable grounds. He considered that by neglecting his patient the plaintiff had forfeited his right to any claim for attendance, for it was of the utmost importance that medical gentlemen should understand their responsibility. The judgment would, therefore, be for defendant.

Obituary.

HENRY CRIBB, ESQ., M.R.C.S.,

OF BISHOP'S STORTFORD.

THIS gentleman, whose demise recently occurred, was the youngest son of the late William Obadiah Cribb, surgeon of the same place. The subject of this notice was one of the oldest medical men in Hertfordshire, having practised in Bishop's Stortford for thirty-six years, during which time he enjoyed the esteem and goodwill not only of the inhabitants of the town and neighbourhood but of all his medical brethren in the locality. He was distinguished for his high sense of professional integrity, and formed a conspicuous example of that straightforward and manly conduct which should always characterise the dealings of members of the profession with one another. The character and reputation of his brethren were always safe in his hands, and that they felt such to be the case was evident from the frequency with which old and young among them called upon him for assistance in times of need. Though a bachelor, Mr. Cribb was one of the most active promoters and supporters of the Society for the relief of the Widows and Orphans of Medical Men in Essex and Hertfordshire. He never failed to urge upon any newcomer into the neighbourhood the propriety of at once joining the Society; and to his kind interest and sympathy many widows and orphans are indebted for increased liberality in the allowances made to them from the funds of the Society. His greatest enjoyment consisted in the performance of private and unpretending acts of benevolence. The esteem in which he was held in the neighbourhood was sufficiently manifest from the aspect of the town—every shop and private residence being closed—during the funeral, and from the long array of mourners who, uninvited, attended his remains to the grave.

MEDICAL APPOINTMENTS.

Dr. W. BAIN has been appointed Assistant-Surgeon to the Glasgow Barony Parish Hospital and Asylum, Barnhill, vice James Godfrey, L.R.C.S.Ed., resigned.

J. P. BIRCH, M.R.C.S.E., has been appointed Medical Officer for the Talyllyn District of the Dolgelly Union.

S. BUCHANAN, M.D., has been appointed Medical Officer for District No. 4 of the City Parish of Glasgow, vice A. Fergus, F.F.P. & S. Glas., resigned.

A. N. COOKSON, M.R.C.S.E., has been appointed Assistant House-Surgeon to the Stockport Infirmary, vice Carter, resigned.

R. H. CROSS, M.R.C.S.E., has been elected Medical Officer, Public Vaccinator, and Registrar of Births &c., for the Strangford Dispensary District of the Downpatrick Union, vice J. B. Johnston, L.K.Q.C.P.I., resigned.

G. C. DOUGLAS, M.R.C.S.E., has been appointed Medical Officer for District No. 3 of the Brackley Union, Northamptonshire, vice G. A. Knott, M.R.C.S.E., resigned.

R. DUKE, M.R.C.S.E., has been appointed Medical Officer for District No. 7 of the Battle Union, Sussex, vice H. B. Smith, M.R.C.S.E., resigned.

R. GRIFFITHS, M.R.C.S.E., has been appointed Medical Officer for the Mallwyd District of the Dolgelly Union.

T. HOWELLS, M.B., C.M., M.R.C.S.E., has been appointed House-Surgeon to the Westminster General Dispensary, Gerrard-street, Soho, vice P. J. Simpson, M.R.C.S.E., appointed Apothecary to the Middlesex County Lunatic Asylum, Colney-hatch.

E. J. IRELAND, M.R.C.S.E., has been elected Medical Officer, Public Vaccinator, and Registrar of Births &c., for the Killormer Dispensary District of the Ballinasloe Union, Co. Galway, vice W. G. May, L.R.C.S.Ed., resigned.

J. A. LOCKING, M.R.C.S.E., has been appointed Certifying Factory Surgeon, Hull, vice R. Hardy, M.R.C.S.E., deceased.

A. A. M'CLURE, L.R.C.P.Ed., has been appointed Medical Officer for the Tottington No. 2 District of the Bury Union, Lancashire.

F. B. MALLETT, M.D., has been appointed Medical Officer for the Eastern Bolton District of the Bolton Union, Lancashire, vice J. Carruthers, M.D., resigned.

F. NUTTALL, M.R.C.S.E., has been appointed Medical Officer for the Tottington No. 1 District of the Bury Union, Lancashire.

G. G. A. SUTCLIFFE, M.R.C.S.E., has been elected Medical Officer and Registrar of Births &c., for the Tartaraghan Dispensary District of the Lurgan Union, Co. Armagh, vice W. Stewart, M.D., appointed to the Portadown District.

Births, Marriages, and Deaths.

BIRTHS.

On the 17th ult., at Risely, Higham Ferrers, the wife of P. H. Banks, M.R.C.S., &c., of a daughter.

On the 22nd ult., at Upper Berkeley-street, Portman-square, the wife of John Harley, M.D., of a daughter.

On the 24th ult., at Blackmeadows, Llantillio Cressenny, Abergavenny, the wife of J. M. Howell, M.R.C.S.E., of a son.

On the 26th ult., at Fitzroy-square, the wife of James Edmunds, M.D., of a son.

On the 26th ult., at Folkestone, the wife of C. E. Fitzgerald, M.D., of a son.

On the 28th ult., at St. Augustine's-road, Camden-town, the wife of H. Edmonds, M.D., Staff Surgeon R.N., of a daughter.

On the 27th ult., at Victoria House, Weston-super-Mare, the wife of Edward Martin, M.R.C.S.E., of a son.

On the 28th ult., at Ipswich, the wife of C. W. Hammond, M.D., of Ipswich, of a son.

MARRIAGES.

On the 27th ult., at St. Stephen's Church, Bayswater, Robert Shuttleworth, Esq., Surgeon, of Kensal-green, youngest son of the late Chas. Shuttleworth, Esq., of Great Bowden, Leicestershire, to Louisa Birtha Moyle, youngest daughter of the late John Whitaker Smith, Esq., Surgeon, of Finsbury-square.

On the 3rd inst., at St. George's, Hanover-square, Edward Johnson, L.R.C.P., L.R.C.S.Ed., eldest son of Edward Johnson, Esq., of Tweed-bank, Kelso, and of Adderstone Mains, Northumberland, and late of Calcutta, to Annie Letitia, second daughter of Mrs. Sandilands, of Belsize-park, Hampstead, and of the late John Sandilands, of Conduit-street, London.

DEATHS.

On the 9th of August, at Wynberg, Cape of Good Hope, Dr. Henry Drew.
On the 25th ult., at South View, Hounslow, A. R. Atkinson, M.D., late of the Bengal Medical Service, aged 43.
On the 25th ult., at Cheltenham, T. D. Harrison, Esq., late of the Madras Medical Service.
On the 27th ult., at Cork, Thos. Powell, L.R.C.S.I., of Enniskean, Co. Cork, aged 31.
On the 28th ult., F. B. Pring, M.R.C.S.E., of Grassington, Yorkshire, aged 54.
On the 28th ult., G. Walker, M.D., of Bonnington-place, Edinburgh.

BOOKS ETC. RECEIVED.

Brande's Dictionary of Science. Part XI.
Mr. Squire's Chromo-Lithographs of Diseases of the Skin.
Watts's Dictionary of Chemistry. Part XXXVI.
Dr. Pidduck on Cholera.
Report of the Liverpool Mortality Sub-Committee.
Dr. Paget's Harveian Oration.
Ellis and Ford's Illustrations of Dissections. Nos. 22 and 23.
Dr. Shapter on Sanitary Measures, and their Results.
Dr. Chase's Dental Hygiene. (Iowa, U.S.)
Westminster Review.
Southern Medical and Surgical Journal. No. 1. Third Series. (Augusta, Ga.)
Hardwicke's Science Gossip.
Maunder's Scientific and Literary Treasury. New Edition.
Art Journal.
The Medico-Chirurgical Journal. No. 1. (Ceylon.)
Quarterly Journal of Microscopical Science.
&c. &c. &c.

To Correspondents.

A. K. C.—Undoubtedly the proceedings of a few unruly young gentlemen at the introductory lecture at King's College on Monday last are highly reprehensible. The days are gone by when such unseemly displays can either be tolerated or excused. It is creditable to the medical students of the present time that their conduct presents in this respect a striking and pleasing contrast to that of some of their predecessors of a quarter of a century back. An exception to this rule is therefore the more noticeable and lamentable, occurring as it did at an institution of so high and serious a character, and during the address of a surgeon whose kindness to the student is proverbial, and who has done so much for surgery. We cannot agree with our correspondent that the publication of names would lead to any good result. The "demonstration" was so exceptional that we have no reason to suppose it will be repeated. We regret with him that one gentleman of mature age, and who ought to have known better, should have been so conspicuous in the unhappy affair.

An Army Doctor.—The publication of the letter would have no effect unless the name of the writer was attached to it.

Dr. E. Williams.—The person whose bill Dr. Williams sends us is registered. Dr. Williams should forward copies of the bill to the licensing bodies whose diplomas are held by the advertiser in question.

THE letters of our Edinburgh and Paris correspondents are unavoidably postponed.

D. D.—It would be unsafe to wear the clothes. The preparation named would not act efficiently as a disinfectant.

LIGATURE BY SILVER WIRE OF ARTERIES FOR ANEURISM.

To the Editor of THE LANCET.

SIR,—I notice in your impression of September 22nd a report of two cases of ligature by silver wire of arteries for aneurism. In your introductory remarks you say that this plan is new in this country, although employed previously in one case in America. I think it right to inform you that in the year 1859 or 1860 I employed the silver wire to ligature the external iliac artery for femoral aneurism in a patient of the Hull Infirmary, and that in the same institution I employed it again to ligature the femoral artery for the cure of popliteal aneurism in 1864 or 1865.

I was led to depart from the ordinary plan in these cases in the hope that, as less irritation is caused by the presence of metallic wire than by hempen or silk thread in sutures, the same result would take place when metal was used for the purpose of ligature, and that in this way the principal danger of the ligature—secondary hæmorrhage during its separation—would be greatly diminished. My first case died in consequence of suppuration in the sac, but was quite satisfactory as far as the results of the ligature were concerned. But in the second, secondary hæmorrhage to an alarming extent took place upon the eighth day, and an ordinary ligature had to be applied above and below, after which the case did well. I may add that I was influenced to try the silver wire by some experiments upon dogs, in which it seemed that the presence of the silver ligature created no irritation, and resulted in simple occlusion of the artery.

I am, Sir, your obedient servant,
KELBURNE KING, Surgeon to the Hull Infirmary.
Bridlington Quay, Yorkshire, Sept. 26th, 1866.

T.—There is a discrepancy in the results of the administration of the medicine to the dog. On one day it seemed to have caused stupefaction and convulsions, and on another sickness. The details of the cases are not given with sufficient minuteness for us to form an opinion upon them. It is right, as a general rule, to decline examining or experimenting with the medicine of another practitioner, unless with his concurrence, or in discharge of medico-legal duty imposed by authority.

A Student Reader.—We really have too much work on our hands to answer abstruse questions in chemistry.

Mr. W. Rawson should consult one of the surgeons at the London Hospital.

PURE WATER.

To the Editor of THE LANCET.

SIR,—Your correspondent, "A. A. Y." is correctly informed that in Bermuda and other places they catch the rain water. Keeping it clean is, however, quite another thing. I have not been in Bermuda; but in St. Thomas's (West Indies), and George Town, Demerara (where I have been), where the inhabitants are entirely dependent on the clouds for their supply of fresh water, it is anything but clean. The flats on which the rain is collected in these places are necessarily exposed, and become covered during a drought with dust containing a quantity of organic matter. This is washed by the first shower that falls into the tanks, where decomposition soon commences. I have known instances where such a quantity of dirt has thus accumulated in the bottom of tanks that negroes have been sent down (diving to the bottom) to clear the obstructions which block up the outlet pipe; and this water was, of course, drunk afterwards. Besides the above-named sources of impurity, the rain becomes impregnated with nitrogenous compounds (nitrate of ammonia ?), which exist in the tropical atmosphere in considerable quantity.

The evil attendant on this system of water-supply has long been felt, more especially in St. Thomas's, where an immense quantity of water is consumed by the numerous ships which visit that port; and last year an English gentleman proposed to supply the town with pure water, condensed by a Normandy apparatus, at a very low cost. When I left St. Thomas's the proposal was under discussion, and no doubt has since been accepted.

Would it not be worth consideration as to whether the same plan might not be adopted in London for supplying pure water for drinking and culinary purposes? The expense would, of course, be a matter for consideration; but a great quantity of steam could be condensed without a further outlay than the cost of an apparatus if the waste steam of the manufactories was thus utilized.

I can speak from experience as to the purity and freshness of the water condensed in the apparatus invented by Dr. Normandy, as for six years I seldom drank any other. Condensed from sea-water, as is the case on board a ship, it is clear, tasteless, and sparkling; as it leaves the condenser, it effervesces like champagne, and, no matter how long kept (in clean iron tanks), never gets vapid or stale. As a proof of its wholesomeness, I have observed that when lying in St. Thomas's, if by any chance the supply of condensed water made through the voyage became exhausted, and that the ship's company were obliged to drink St. Thomas's water, diarrhœa was sure to break out within twenty-four hours; and though it gradually lessened as the system learned to tolerate the irritant which caused it, yet it never entirely disappeared until condensed water was again served out.

In thus procuring water, it should not, of course, be forgotten that volatile impurities would be carried over with the steam, and that therefore water supposed to contain such should be avoided. Sea-water, as it contains a minimum of organic matter, would, doubtless, be the best to distil from.

I am, Sir, your obedient servant,
Portsea, September, 1866. R. E. POWER, M.R.C.S.

Mr. J. Mitchell, (Barrow-in-Furness.)—If any slanderous expressions calculated to injure professional reputation can be proved to have been made, a civil action could be brought against the offender, and damages probably obtained.

A. T.—By courtesy, not by right.

Mr. Thomas Palmer, (Cambridge.)—Our correspondent is mistaken. The letter did not refer to the case of Toomer. He is still in prison.

A Student, (King's College.)—Yes, at a future time.

WHY MEDICAL MEN SHUN THE ROYAL NAVY.

To the Editor of THE LANCET.

SIR,—The evidence before Sir Alexander Milne's Committee is not yet procurable. Is it being purposely withheld? If so, it is quite in keeping with the recent Naval Medical Warrant, which has failed in its intention of tempting assistant-surgeons to giving up a lifetime in the navy. If qualified surgeons are wanted, it is a question of full pay outbidding all other services—of unconditional optional retirement at twenty years' full-pay service.

Let Sir John Pakington deal with the medical question for himself. In the issue of the late Warrant, the ex-Board of Admiralty, headed by the Duke of Somerset, can now feel no envy that their labours have been taken credit for by the present Admiralty. Let Sir John Pakington first learn the average tolerance of full-pay service amongst the 166 surgeons retired, also amongst those surgeons who have died on the active list. I hear the evidence before Admiral Milne's Committee does not furnish these data; but it does record the telling truth, that the average time in the navy to give twenty years' full-pay service is twenty-four years, at which *finale* each surgeon will have given up the best years of his life. The broken health amongst medical men in the navy is very great, and of the numbers promoted to the rank of surgeon, the survivors are not too many who complete twenty years on full pay; but, beyond this, each year of shipboard life becomes most dispiriting and trying, and the surgeons completing twenty-five years' full-pay service out of the numbers who have entered the navy are very few. In every part of the United Kingdom of Great Britain and Ireland the navy is well ventilated by retired surgeons, and by those who have taken the bold step of leaving the navy and beginning the world again.

Let Sir John Pakington make peace with the surgeons retired from broken health on small paltry annuities. Let him deal wisely and liberally with the medical officers on the active list; for if any complaints remain unredressed, these tell most potently against qualified medical men joining the navy. The very fact of no candidates coming forward must warn the Admiralty that the navy is unpopular with its adherents, and that naval surgeons advise their friends to avoid the navy. I remain, Sir, yours truly,
September, 1866. ERES.

PURIFICATION OF WATER.

We called attention last week to a paragraph which appeared in the *Scotsman*, stating the discovery by a gentleman of the power in shale-refuse of purifying foul water. We have received a letter from the Silicated Carbon Company, pointing out that Dalke's patent is for the use of Torbane Hill mineral, a kind of shale.

AN ENEMA-TUBE.

To the Editor of THE LANCET.

SIR,—Will you kindly allow me space to describe a form of enema-tube which I have found of great use in my practice, and which I think combines simplicity, efficiency, and cheapness in no ordinary degree.

The apparatus consists simply of five or six feet of three-eighths inch india-rubber tubing, to one end of which is fixed an ordinary funnel capable of holding a sufficient quantity of liquid, and to the other end one of the common ivory insertion pipes. The method of using it is as follows:—1st, fill the funnel with the liquid to be employed, whilst holding the exit pipe at the same level; 2ndly, squeeze with the finger and thumb the end of the pipe to which the ivory is attached, to prevent premature exit of the fluid; 3rdly, insert the ivory exit pipe into the rectum; 4thly, elevate the funnel to the length of the tube, and allow hydrostatic pressure to force in the injection.

The suggestion was made to me by a friend, whose name I have not liberty to mention; but who, I am sure, will be glad if his simple contrivance should become useful to the profession.

I remain, Sir, yours truly,

Sudbury, Derby, September 26th, 1866. J. Y. TOTHERICK, M.D.

Mr. Charles Stanhope, (Halifax.)—1. There is no such register except the baptismal one. We have no means of assisting our correspondent in the manner he requires.—2. This question should be addressed to the Registrar of the University of Durham.

THE KEEPING OF "POISONS."

To the Editor of THE LANCET.

SIR,—Continually are we painfully reminded of the necessity for the careful keeping of dangerous medicines. Another death is now added to the number, occasioned, we fear, by the too careless manner in which poisons are deposited by the side of other medicines of a less harmful character. Surely "surgeries" ought to be "models" of perfection. Poisons in every instance ought to be excluded a place on the shelf, where less danger can arise. Pharmaceutical chemists of the present day have done much to prevent mistakes of this sort, by keeping poisons in a cupboard apart from the dispensing counter, thereby avoiding the possibility of error. We, as pharmaceutical chemists, have paid very great attention to this particular department.

We remain, Sir, yours obediently,

CURTIS AND CO.,

Baker-street, October 3rd, 1866. Pharmaceutical Chemists.

*** The practice of separating *poisonous* from all other drugs cannot be too strongly insisted upon. We believe it generally obtains in the dispensaries of private practitioners.

M. B.—A letter for the writer of a communication on the treatment of chronic dysentery, and signed "M. B.," which appeared in our impression of September 22nd, now lies at our Office.

THE SANITARY CONDITION OF MARGATE.

OUR contemporary, the *Builder*, contains the following letter in its last impression:—

"Permit me to suggest to the Town Council the following inquiries:—

"1. The number of houses with cesspools or pits full of soil with no existing drains.

"2. The exact distance, in feet and inches, of such cesspools from any adjacent well, and the depth of such well.

"3. Whether such cesspools are periodically emptied, or drain, or are absorbed, into the chalk.

"4. The advisability of a direct water-supply, with cistern and closets.

"5. The construction of an outfall sewer and sewage reservoir, remote from the harbour and town.

"6. The necessity of a total revision of the present system, and the substitution of house drains, with proper water-supply.

"The stench from some of these closets is dreadful, and conclusive as to the state of things, and the paramount necessity of a change. These remarks apply with more or less force to nearly every watering-place on the coast. It may, indeed, be doubted whether a visit to many is not fraught with danger in place of health. "A SURVEYOR."

A District Medical Officer.—There is no law to prevent the use of methylated spirit for external medicinal applications, though it is not sanctioned by the British Pharmacopœia.

TREATMENT OF CHRONIC DYSENTERY.

To the Editor of THE LANCET.

SIR,—Perhaps giving a few notes of a case of the above disease, with the treatment I pursued, and that successfully, may not be uninteresting to "M. B." in his predicament.

The patient is an out-door labouring woman, aged thirty years. She is unmarried, but has got two illegitimate children. I was first called in on June 1st, 1866. I found her very weak and emaciated; tenderness over abdomen. For three weeks previous to my visiting her she had looseness of the bowels, bloody and slimy stools. I ordered at once boiled rice and milk, beef-tea (strong), and rest. To relieve abdominal pain, I prescribed tincture of cantharides, half a drachm; liniment of spiritis of ammonia, three ounces: mix for a liniment, and rub it over the bowels two or three times daily. However, the best remedy was tincture of opium, one drachm and a half; dilute sulphuric acid, three drachms and a half; infusion of roses, two ounces; infusion of quassia, six ounces: one tablespoonful every four hours. Also a suppository was occasionally used, being oiled, and now and then pushed up the anus; it contained two grains of powdered opium, twelve grains of white wax, and one drachm of axungia. These with stimulants, especially brandy in beef-tea, &c., brought her so far round as that on July 28th she was able to follow her usual employment.

I am, Sir, your obedient servant,

Portobello, September 27th, 1866. A. M. T. RATTRAY, M.D.

A Metropolitan Student.—The annual registration at both College and Hall commenced on the 1st instant, and will terminate on the 15th.

Surgeon R.N. is thanked for the information; but it could not be used.

EVERY communication, whether intended for publication or otherwise, must be authenticated by the name and address of the writer. Papers not accepted cannot be returned. Articles in newspapers, to which attention is sought to be directed, should be marked. Communications not noticed in the current number of THE LANCET will receive attention the following week.

COMMUNICATIONS, LETTERS, &c., have been received from — Mr. Savory; Dr. Ringer; Mr. Holmes Coote; Mr. Baker Brown; Mr. Haynes Walton; Dr. Henry Bennet; Dr. Edwards Crisp; Dr. Ogle; Hon. B. F. Primrose; Mr. Smith; Mr. Hill; Mr. Symonds; Mr. Chale; Mr. Davison; Mr. Parry, Poole; Mr. Lees, Durham; Mr. Tyte; Mr. Walker; Mr. Holmes, Burnley; Mr. Shaw; Mr. Kelly; Mr. Hett, Worksop; Dr. Collins; Dr. Holt, Castleford; Mr. Lovegrove; Mr. Robinson; Mr. Jubb; Dr. Wace; Mr. Knight; Mr. Burns, Ross; Mr. R. Hinton; Mr. Low, Durham; Mr. J. Leonard; Dr. Veale; Mr. Mitchell; Mr. Parkin; Mr. Payne, Sheffield; Mr. Barrett; Mr. Maurice; Dr. Fairless, Coupar; Messrs. Curtis and Co.; Mr. Harding; Dr. Shapter, Exeter; Dr. Smith, Gorton; Mr. Walter; Dr. Black, Oban; Mr. Davy, Wareham; Dr. Rattray, Portobello; Mr. Chalmers; Mr. Lely; Dr. Totherick, Sudbury; Mr. Chambers; Dr. Harris; Dr. M'Dougall; Mr. Best, Stanningley; Dr. Barker; Mr. Davison; Mr. Atkinson, Leeds; Dr. Clark; Dr. Holland, Emsworth; Mr. Stanhope; Dr. Muspratt, Liverpool; Messrs. Ireland and Co.; Dr. Eames, Milton; Dr. Macloughlin; Dr. Down; Dr. Fotherby; Dr. Banks; Mr. Berry; Mr. Ewens, Blandford; Mr. Power, Portsea; Mr. Walker, Middleton; Dr. Meymott; Dr. Palmer; Mr. Collinson; Mr. Lundy; Mr. Webber; Mr. Evans; Mr. Warren, Kilsby; Dr. Williams, Hastings; Mr. Kelly; Dr. Vanderstraaten, Ceylon; Mr. G. E. Martindale; Dr. Gwynn; D. D.; C. X.; J. E.; A Student Reader; Y. Z.; A District Medical Officer; T.; G. V.; &c. &c.

THE *Oxford University Herald*, the *Indian Medical Gazette* (Calcutta), the *Hemel Hempstead Observer*, the *Harrogate Herald*, and the *Birmingham Daily Post* have been received.

Medical Diary of the Week.

Monday, Oct. 8.

ST. MARK'S HOSPITAL FOR FISTULA AND OTHER DISEASES OF THE RECTUM.—Operations, 9 A.M. and 1½ P.M.
ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
METROPOLITAN FREE HOSPITAL.—Operations, 2 P.M.

Tuesday, Oct. 9.

ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
GUY'S HOSPITAL.—Operations, 1½ P.M.
WESTMINSTER HOSPITAL.—Operations, 2 P.M.
NATIONAL ORTHOPÆDIC HOSPITAL.—Operations, 2 P.M.

Wednesday, Oct. 10.

ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
MIDDLESEX HOSPITAL.—Operations, 1 P.M.
ST. MARY'S HOSPITAL.—Operations, 1½ P.M.
ST. BARTHOLOMEW'S HOSPITAL.—Operations, 1½ P.M.
ST. THOMAS'S HOSPITAL.—Operations, 1½ P.M.
GREAT NORTHERN HOSPITAL.—Operations, 2 P.M.
UNIVERSITY COLLEGE HOSPITAL.—Operations, 2 P.M.
LONDON HOSPITAL.—Operations, 2 P.M.
HUNTERIAN SOCIETY.—7½ P.M. Council Meeting.—8 P.M. Dr. Dalby, "On Cholera."
MICROSCOPICAL SOCIETY OF LONDON.—8 P.M.

Thursday, Oct. 11.

ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
CENTRAL LONDON OPHTHALMIC HOSPITAL.—Operations, 1 P.M.
ST. GEORGE'S HOSPITAL.—Operations, 1 P.M.
LONDON SURGICAL HOME.—Operations, 2 P.M.
WEST LONDON HOSPITAL.—Operations, 2 P.M.
ROYAL ORTHOPÆDIC HOSPITAL.—Operations, 2 P.M.

Friday, Oct. 12.

ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
WESTMINSTER OPHTHALMIC HOSPITAL.—Operations, 1½ P.M.

Saturday, Oct. 13.

ST. THOMAS'S HOSPITAL.—Operations, 9½ A.M.
ROYAL LONDON OPHTHALMIC HOSPITAL, MOORFIELDS.—Operations, 10½ A.M.
ST. BARTHOLOMEW'S HOSPITAL.—Operations, 1½ P.M.
KING'S COLLEGE HOSPITAL.—Operations, 1½ P.M.
ROYAL FREE HOSPITAL.—Operations, 1½ P.M.
CHARING-CROSS HOSPITAL.—Operations, 2 P.M.

TERMS FOR ADVERTISING IN THE LANCET.

For 7 lines and under	£0	4	0	For half a page	£2	12	0
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To the Surgical and Medical Professions.—W. F. Durroch, Manufacturer of Surgical Instruments to the Royal Navy, Greenwich Hospital, Guy's Hospital, &c. &c., begs to inform the Profession that he continues to Manufacture SURGICAL INSTRUMENTS of every description, and that he has attained the highest reputation by the approval and patronage of the most eminent Practitioners and Lecturers for the improvements made in various articles. Gentlemen favouring him with their orders may rely on having their Instruments finished in the best and most modern style. Surgical Instruments made to Drawings and kept in repair.—Established 1798.

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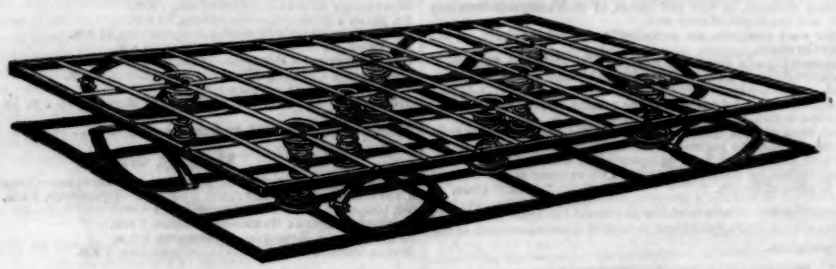

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